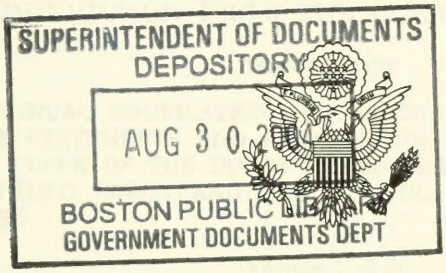
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House Document

No. 280



FINANCIAL DISCLOSURE REPORTS
MEMBERS OF HOUSE OF REPRESENTATIVES
JANUARY 1–DECEMBER 31, 1997
VOLUME 1 OF 3

United States Congressional Serial Set

Serial Number 14489

United States Government Printing Office
Washington : 2000

House Document

No. 280

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105th Congress, 2d Session - - - - - - - - - - - - House Document 105–280

FINANCIAL DISCLOSURE

REPORTS

OF MEMBERS OF THE U.S. HOUSE OF REPRESENTATIVES

FOR THE PERIOD BETWEEN

January 1, 1997 and December 31, 1997

COMMUNICATION FROM THE CLERK OF THE HOUSE

TRANSMITTING

THE ANNUAL COMPILATION OF PERSONAL FINANCIAL DISCLOSURE STATEMENTS AND AMENDMENTS THERETO FILED WITH THE CLERK OF THE HOUSE OF REPRESENTATIVES, PURSUANT TO 2 U.S.C. 703(d)(1) AND RULE XLIV, CLAUSE 1, OF THE HOUSE RULES

(Volume 1 of 3)



JULY 14, 1998.—Referred to the Committee on House Oversight and ordered to be printed

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U.S. GOVERNMENT PRINTING OFFICE

49–736 WASHINGTON : 1998

LETTER OF TRANSMITTAL

OFFICE OF THE CLERK,
U.S. HOUSE OF REPRESENTATIVES,
Washington, DC, July 2, 1998.

Hon. NEWT GINGRICH,
The Speaker, The Capitol,
House of Representatives, Washington, DC.

DEAR MR. SPEAKER: I hereby submit the annual compilation of personal financial disclosure statements filed with the Clerk of the House of Representatives pursuant to the Ethics in Government Act of 1978, as amended, 5 U.S.C. app. § 101–111 (1994), and House Rule XLIV.

This compilation contains the personal financial disclosure statements and amendments thereto required to be filed by Members of the House pursuant to the Act and House Rule XLIV by May 15, 1998. The compilation includes reported financial transactions which occurred between January 1, 1997 and December 31, 1997.

House Rule XLIV provides that the annual compilation of reports filed with the Clerk be printed as a House document by August 1 and contain all such reports filed by Members within the period beginning January 1 and ending June 15 of each year. This compilation is submitted accordingly.

Sincerely yours,

ROBIN H. CARLE,
Clerk, U.S. House of Representatives.

Enclosure.

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1997

FORM A
For use by Members, officers, and employees

RECEIVED
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U.S. HOUSE OF REPRESENTATIVES

Neil Abercrombie
(Full Name)

1233 Longworth House Building
(Mailing Address)

Washington, D.C. 20515

Daytime Telephone (202) 225-2726

HAND DELIVERED (5)
(Office Use Only)

Filer Status

- [X] Member of the U.S. House of Representatives — State: Hawaii District: 1st
- [ ] Officer or Employee — Employing Office

Report Type

- [X] Annual (May 15)
- [ ] Amendment
- [ ] Termination — Termination Date

A *$200 penalty* shall be assessed against anyone who files more than 30 days late.

PRELIMINARY INFORMATION — ANSWER EACH OF THESE QUESTIONS

I Did you or your spouse have "earned" income (e.g., salaries or fees) of $200 or more from any source in the reporting period? **If yes, complete and attach Schedule I.** — Yes [X] No [ ]

II Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? **If yes, complete and attach Schedule II.** — Yes [ ] No [X]

III Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? **If yes, complete and attach Schedule III.** — Yes [X] No [ ]

IV Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset worth more than $1,000 in the reporting period? **If yes, complete and attach Schedule IV.** — Yes [ ] No [X]

V Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? **If yes, complete and attach Schedule V.** — Yes [X] No [ ]

VI Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $250 and not otherwise exempt)? **If yes, complete and attach Schedule VI.** — Yes [ ] No [X]

VII Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $250 from one source)? **If yes, complete and attach Schedule VII.** — Yes [X] No [ ]

VIII Did you hold any reportable positions on or before the date of filing in the current calendar year? **If yes, complete and attach Schedule VIII.** — Yes [ ] No [X]

IX Did you have any reportable agreement or arrangement with an outside entity? **If yes, complete and attach Schedule IX.** — Yes [ ] No [X]

Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION — ANSWER EACH OF THESE QUESTIONS

TRUSTS—Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child? — Yes [ ] No [X]

EXEMPTION—Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption? — Yes [ ] No [X]

CERTIFICATION — THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended. The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct or its designee. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil penalties and criminal sanctions (*See* 5 U.S.C. app. 4, §104 and 18 U.S.C. §1001).

SIGNATURE OF REPORTING INDIVIDUAL: Neil Abercrombie

DATE (Month/Day/Year): 5-15-98

(1)

Name Neil Abercrombie	Page 2 of 5

SCHEDULE I — EARNED INCOME

List the source, type, and amount of earned income from any source (other than the filer's current employment by the U.S. Government) totalling $200 or more during the preceding calendar year. For a spouse, list the source and amount of any honoraria; list only the source for other spouse earned income exceeding $1,000.

	Source	Type	Amount
Examples	Keene State	Approved Teaching Fee	$6,000
	State of Maryland	Legislative Pension	$9,000
	Civil War Roundtable (Oct 2nd)	Spouse Speech	$1,000
	Ontario County Board of Education	Spouse Salary	NA
	State of Hawaii	Legislative pension	$23,431.20

For payments to charity in lieu of honoraria, use Schedule II.

Name Neil Abercrombie | Page 3 of 5

SCHEDULE III — ASSETS AND "UNEARNED" INCOME

BLOCK A — Asset and/or Income Source

Identify (a) each asset held for investment or production of income with a fair market value exceeding $1,000 at the end of the reporting year, and (b) any other asset or source of income which generated more than $200 in "unearned" income during the year. For rental property or land, provide an address. Provide full names of any mutual funds. For an IRA or retirement plan that is *self-directed*, list the underlying assets worth more than $1,000. For an IRA or retirement plan that is not selfdirected, name the institution holding the account.

Exclude: Your personal residence(s) (unless there is rental income), any debt owed to you by your spouse, or by your or your spouse's child, parent, or sibling, any deposits totalling $5,000 or less in personal savings accounts; any financial interests in or income derived from U.S. Government retirement programs.

If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC) or is jointly held (JT), in the optional column on the far left.

BLOCK B — Value of Asset

at close of reporting year. If you use a valuation method other than fair market value, please specify the method used. If an asset was sold and is included only because it generated income, the value should be "None."

BLOCK C — Type of Income

BLOCK D — Amount of Income

For IRA's and retirement plans that are *not* self-directed, you may write in "NA" for income.

BLOCK E — Transaction

Indicate if asset was purchased (P), sold (S), or exchanged (E) in reporting year.

	BLOCK A	BLOCK B												BLOCK C							BLOCK D											BLOCK E
		A None	B $1 – $1,000	C $1,001 – $15,000	$15,001 – $50,000	E $50,001 – $100,000	F $100,001 – $250,000	G $250,001 – $500,000	H $500,001 – $1,000,000	I $1,000,001 – $5,000,000	J $5,000,001 – $25,000,000	K $25,000,001 – $50,000,000	L Over $50,000,000	DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Type of Income (Specify. For Example: Partnership Income or Farm Income)	I None	II $1 – $200	III $201 – $1,000	IV $1,001 – $2,500	V $2,501 – $5,000	VI $5,001 – $15,000	VII $15,001 – $50,000	VIII $50,001 – $100,000	IX $100,001 – $1,000,000	X $1,000,001 – $5,000,000	XI Over $5,000,000	P, S, E
SP. DC. JT	Examples: SP Mega Corp. Stock; Simon & Schuster; 1st Bank of Paducah, KY accounts		Indefinite			X	X							X		X				Royalties				X		X		X			P
Jt	Coop Apartment (Makiki Street, Honolulu, HI)					X								X							X (Net)					X (Gross)					
	University of Hawaii Federal Credit Union			X											X								X								
	Charles Schwab IRA				X																NA										

For additional assets and unearned income, use next page.

SCHEDULE V — LIABILITIES

Report liabilities of over $10,000 owed to any one creditor ***at any time*** during the reporting period by you, your spouse, or dependent child. Mark the highest amount owed during the year. **Exclude:** Any mortgage on your personal residence (unless it is rented out), loans secured by automobiles, household furniture, or appliances, and liabilities owed to a spouse, or the child, parent, or sibling of you or your spouse. Report ***revolving charge accounts*** only if the balance at the end of the reporting period exceeded $10,000.

SP, DC, JT	Creditor	Type of Liability	Amount of Liability									
			B $10,001 – $15,000	C $15,001 – $50,000	D $50,001 – $100,000	E $100,001 – $250,000	F $250,001 – $500,000	G $500,001 – $1,000,000	H $1,000,001 – $5,000,000	I $5,000,001 – $25,000,000	J $25,000,001 – $50,000,000	K Over $50,000,000
	Example: First Bank of Wilmington, Delaware	Mortgage on 123 Main St., Dover, Del				X						
	Vera Abercrombie	Mortgage on Makiki St. apt.			X							

SCHEDULE VI — GIFTS

Report the source, a brief description, and the value of all gifts totalling more than $250 received by you, your spouse, or a dependent child from any source during the year.

Exclude: Gifts from relatives, gifts of personal hospitality of an individual, local meals, and gifts to a spouse or dependent child that are totally independent of his or her relationship to you. Gifts with a value of $100 or less need not be added towards the $250 disclosure threshold.

Note: The gift rule (House Rule 51) prohibits gifts except as specifically provided in the rule.

Source	Description	Value
Example Mr. Joseph H. Smith, Anytown, Anystate	Silver Platter (determination on personal friendship received from Committee on Standards)	$270

Use additional sheets if more space is required.

SCHEDULE VII —TRAVEL PAYMENTS AND REIMBURSEMENTS

Identify the source and list travel itinerary, dates, and nature of expenses provided for travel and travel-related expenses totalling more than $250 received by you, your spouse, or a dependent child during the reporting period. Indicate whether a family member accompanied the traveler at the sponsor's expense, and the amount of time, if any, that was not at the sponsor's expense. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor.

Exclude: Travel-related expenses provided by federal, state, and local governments, or by a foreign government required to be separately reported under the Foreign Gifts and Decorations Act (5 U.S.C. § 7342); travel paid for by a Federal political committee; travel provided to a spouse or dependent child that is totally independent of his or her relationship to you.

Source	Date(s)	Point of Departure—Destination—Point of Return	Lodging? (Y/N)	Food? (Y/N)	Was a Family Member Included? (Y/N)	Any time not at sponsor's expense
Examples Chicago Chamber of Commerce	Mar. 2	Wash., D.C.—Chicago—Wash., D.C.	N	N	N	N
Roycroft Corporation	Aug 6–13	Wash., D.C —Los Angeles—Cleveland	Y	Y	Y	4 Days
Graphic Communications International Union (Speech)	June 21	DC-Detroit-DC	N	N	N	N
Amtrak Operation RedBlock (Speech)	Sep 5-6	DC-Pittsburgh-DC	Y	Y	N	N
Int'l Assoc. of Machinists & Aerospace Workers (Speech)	Oct 05	DC-Cincinnati-DC	N	N	N	N

This page may be copied if more space is required.

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1997

Form A
For use by Members, officers, and employees

98 MAY 15 PM 12:42

HAND DELIVERED

(Office Use Only) 10

Gary L. Ackerman
(Full Name)

2243 Rayburn
(Mailing Address)

Washington DC 20515

Daytime Telephone: 202-225-2601

Filer Status: [X] Member of the U.S. House of Representatives — State: NY, District: 05 — [ ] Officer or Employee — Employing Office:

Report Type: [X] Annual (May 15) — [ ] Amendment — [ ] Termination — Termination Date:

A $200 penalty shall be assessed against anyone who files more than 30 days late.

PRELIMINARY INFORMATION -- ANSWER EACH OF THESE QUESTIONS

I. Did you or your spouse have "earned" income (e.g., salaries or fees) of $200 or more from any source in the reporting period? **If yes, complete and attach Schedule I.** — Yes [X] No [ ]

II. Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? **If yes, complete and attach Schedule II.** — Yes [X] No [ ]

III. Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? **If yes, complete and attach Schedule III.** — Yes [X] No [ ]

IV. Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset worth more than $1,000 in the reporting period? **If yes, complete and attach Schedule IV.** — Yes [X] No [ ]

V. Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? **If yes, complete and attach Schedule V.** — Yes [X] No [ ]

VI. Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $250 and not otherwise exempt)? **If yes, complete and attach Schedule VI.** — Yes [ ] No [X]

VII. Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $250 from one source)? **If yes, complete and attach Schedule VII.** — Yes [X] No [ ]

VIII. Did you hold any reportable positions on or before the date of filing in the current calendar year? **If yes, complete and attach Schedule VIII.** — Yes [X] No [ ]

IX. Did you have any reportable agreement or arrangement with an outside entity? **If yes, complete and attach Schedule IX.** — Yes [X] No [ ]

Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION -- ANSWER EACH OF THESE QUESTIONS

TRUSTS- Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefitting you, your spouse, or dependent child? (See Instructions, pages 10-11.) — Yes [ ] No [X]

EXEMPTION Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption? (See Instructions, page 11.) — Yes [ ] No [X]

CERTIFICATION -- THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended. The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct or its designee. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil penalties and criminal sanctions (See 5 U.S.C. app. 4, 104 and 18 U.S.C 1001).

SIGNATURE OF REPORTING INDIVIDUAL — Gary L. Ackerman

DATE (Month/Day/Year) — May 14, 1998

SCHEDULE I -- EARNED INCOME

List the source, type, and amount of earned income from any source (other than the filer's current employment by the U.S. Government) totalling $200 or more during the preceding calendar year. For a spouse, list the source and amount of any honoraria; list only the source for other spouse earned income exceeding $1,000. For further information, see instructions, pages 12-13.

	Source	Type	Amount
Examples:	Keene State	Approved Teaching Fee	$10,000
	State of Maryland	Legislative Pension	$9,000
	Civil War Roundtable (Oct. 2nd)	Spouse Speech	$1,000
	Ontario County Board of Education	Spouse Salary	NA
	Pride of Judea Mental Health Center	Spouse compensation	N/A
	Spouse private practice	Spouse compensation	N/A

For payments to charity in lieu of honoraria, use Schedule II.

SCHEDULE II -- PAYMENTS IN LIEU OF HONORARIA MADE TO CHARITY

List the source, activity (i.e., speech, appearance, or article), date, and amount of any payment made by the sponsor of an event to a charitable organization in lieu of an honorarium.
A separate confidential list of charities receiving such payments must be filed directly with the Committe on Standards of Official Conduct. An envelope for transmitting the list is included in each Member's filing package. For further information, see Instructions, pages 13-14.

Source		Activity	Date	Amount
Examples:	Association of American Associations, Wash., D.C.	Speech	Feb. 2, 1994	$2,000
	XYZ Magazine	Article	Aug. 13, 1994	$500
The Connell Company, Westfield, NJ		Speech	4/2/97	$ 2,000

SCHEDULE III -- ASSETS AND "UNEARNED" INCOME

	BLOCK A **Asset and/or Income Source** Identify (a) each asset held for investment or production of income with a fair market value exceeding $1,000 at the end of the reporting year, and (b) any other asset or source of income which generated more than $200 in "unearned" income during the year. For rental property or land, provide an address. Provide full names of any mutual funds. For an IRA or retirement plan that is *self-directed*, list the underlying assets worth more than $1,000. For an IRA or retirement plan that is *not* self-directed, name the institution holding the account. **Exclude:** Your personal residence(s) (unless there is rental income), any debt owed to you by your spouse, or by your or your spouse's child, parent, or sibling; any deposits totalling $5,000 or less in personal savings accounts; any financial interests in or income derived from U.S. Government retirement programs. If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC) or is jointly held (JT), in the optional column on the far left. For further information, see Instructions, pages 14-20	BLOCK B **Value of Asset** at close of reporting year. If you use a valuation method other than fair market value, please specify the method used. If an asset was sold and is included only because it generated income, the value should be "None."	BLOCK C **Type of Income** If other than one of the listed categories, specify the type of income by writing a brief description in this block.	BLOCK D **Amount of Income** For IRA's and retirement plans that are *not* self-directed, you may write in "NA" for income.	BLOCK E **Transaction** Indicate if asset was purchased(P), sold(S), or exchanged(E) in reporting year.
SP, DC, JT	*Examples:* SP — Mega Corp. Stock 123 Main St., Dover, Del 1st Bank of Paducah, KY accounts	$15,001 - $50,000 $250,001 - $500,000 $50,001 - $100,000	Dividends Rent Interest	$201 - $1,000 $1,001 - $2,500 $5,001 - $15,000	P
	Fidelity Magellan	$1,001 - $15,000	Capital Gains and Dividends	$1,001 - $2,500	
	Fidelity Spartan NY Hi	$50,001 - $100,000	Capital Gains and Dividends	$2,501 - $5,000	
	News Communications, Inc., Common Stock	$500,001 - $1,000,000	Capital Gains	None - $200	
	IRA--Family Management Corp.	$50,001 - $100,000	NA	NA	
	IRA--Nationwide	$15,001 - $50,000	NA	NA	
SP	IRA--Nationwide	$15,001 - $50,000	NA	NA	
	FM Multi-Strategy Inv. Limited Partnership	$100,001 - $250,000	Cap Gains, Dividends, Interest	$1,001 - $2,500	P
	Melrose Credit Union	$1,001 - $15,000	Interest	$201 - $1,000	
	ACB Publications (1/3 interest)	$15,001 - $50,000	Capital Gains	None - $200	

SCHEDULE III -- ASSETS AND "UNEARNED" INCOME

	Multi-Media Advertising, Inc./Flushing Tribune, Inc.	$15,001 - $50,000	(See agreements)		
	Clubank (various)	$1,001 - $15,000	Interest	None - $200	
	Collagenesis, Inc., stock	$15,001 - $50,000	Capital Gains	None - $200	
	HI-Low Stock Club	None - $1,000	Capital Gains	None - $200	S
	Pershing/Alliance Cash	None - $1,000	Interest and Dividends	$201 - $1,000	
	Fidelity Advisor Global Natural Resource	None - $1,000	Capital Gains	$1,001 - $2,500	S
	Fidelity Advisor Growth Opportunities CL T	None - $1,000	Capital Gains	$2,501 - $5,000	S
	John Hancock Regional Bank Fund CL B	None - $1,000	Cap Gains, Dividends, Interest	$15,001 - $50,000	S
	Massachusetts Financial Emerging Growth TR B	None - $1,000	Capital Gains	$1,001 - $2,500	S
	Oppenheimer Main Street Income and Growth C	$1,001 - $15,000	Cap Gains, Dividends, Interest	$5,001 - $15,000	S
	Seligman Frontier Fund, Inc., Class D	$1,001 - $15,000	Capital Gains	$2,501 - $5,000	S
	Fidelity Advisor Mid Cap Stock CL T	None - $1,000	Capital Gains	$201 - $1,000	S
	Fidelity Advisor Overseas	None - $1,000	Capital Gains	$201 - $1,000	S
	Congressional Federal Credit Union	$1,001 - $15,000	Interest	None - $200	
	United States Treasury Notes	None - $1,000	Cap Gains, Dividends, Interest	$201 - $1,000	S

SCHEDULE IV -- TRANSACTIONS

Report any purchase, sale, or exchange by you, your spouse, or dependent child during the reporting year of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child, or the purchase or sale of your personal residence, unless it is rented out. For further information, see Instructions, pages 20-21.

SP,DC,JT	Asset	Type of Transaction	Date	Amount of Transaction
	Example. Mega Corporation Common Stock	Purchase	10/12/94	$15,001 - $50,000
	Fidelity Advisor Global Natural Resource	Sold	9/19/97	$1,001 - $15,000
	Fidelity Advisor Growth Opportunities CL T	Sold	2/6/97; 9/19/97	$15,001 - $50,000
	John Hancock Regional Bank Fund CL B	Sold	2/6/97; 9/19/97	$15,001 - $50,000
	Massachusetts Financial Emerging Growth TR B	Sold	9/19/97	$1,001 - $15,000
	Oppenheimer Main Street Income and Growth C	Sold	9/19/97	$15,001 - $50,000
	Seligman Frontier Fund, Inc., Class D	Sold	2/6/97; 9/19/97	$15,001 - $50,000
	Fidelity Advisor Mid Cap Stock CL T	Sold	2/6/97	$1,001 - $15,000
	Fidelity Advisor Overseas	Sold	2/6/97	$1,001 - $15,000
	FM Multi-Strategy Inv. Limited Partnership	Purchase	10/1/97	$50,001 - $100,000
	United States Treasury Notes due 5/15/97 @ 6.50%	Sold	5/2/97	$1,001 - $15,000
	Hi-Low Stock Club	Sold	1/97	$1,001 - $15,000

SCHEDULE V -- LIABILITIES

Report liabilities of over $10,000 owed to any one creditor ***at any time*** during the reporting period by you, your spouse, or dependent child. Mark the highest amount owed during the year.
Exclude: Any mortgage on your personal residence (unless it is rented out); loans secured by automobiles, household furniture, or appliances, and liabilities owed to a spouse, or the child, parent, or sibling of you or your spouse. Report ***revolving charge accounts*** only if the balance at the end of the reporting period exceeded $10,000. For further information, see Instructions, pages 21-22

SP,DC,J	Creditor	Type of Liability	Amount of Liability
	Example: First Bank of Wilmington, Delaware	Mortgage on 123 Main St., Dover, Del.	$100,001 - $250,000
	Fidelity Investments	Margin account	$15,001 - $50,000
	Citibank	Checking Plus	$15,001 - $50,000
	Various credit cards	Revolving credit	$15,001 - $50,000

SCHEDULE VII -- TRAVEL PAYMENTS AND REIMBURSEMENTS

Identify the source and list travel itinerary, dates, and nature of expenses provided for travel and travel-related expenses totalling more than $250 received by you, your spouse, or a dependent child during the reporting period. Indicate whether a family member accompanied the traveler at the sponsor's expense, and the amount of time, if any, that was not at the sponsor's expense. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor.
Exclude: Travel-related expenses provided by federal, state and local governments, or by a foreign government required to be separately reported under the Foreign Gifts and Decorations Act (5 U.S.C. 7342), travel paid for by a Federal political committee; travel provided to a spouse or dependent child that is totally independent of his or her relationship to you. For further information, see Instructions, pages 24-26

Source	Date(s)	Point of Departure--Destination--Point of Return	Lodging? (Y/N)	Food? (Y/N)	Was a Family Member Included? (Y/N)	Any time not at sponsor's expense
Examples. Chicago Chamber of Commerce	Mar 2	Wash., D.C. -Chicago-Wash., D.C.	N	N	N	N
Mega Corporation	Aug 6-13	Wash., D.C. -Los Angeles-Cleveland	Y	Y	Y	4 Days
Aspen Institute	3/7-9/97	Hershey, PA; travel self-provided	Y	Y	Y	
Indian-American Forum for Political Education	9/6/97	New York - Raleigh, NC - New York	N	N	N	
Center for Middle East Peace	12/9-18/97; travel dates 12/9, 12/10, 12/18	Washington - Cairo - Tel Aviv - Gaza - Tel Aviv - Amman - Beirut - Daha, Quatar - Damascus - Washington	Y	Y	N	

SCHEDULE VIII -- POSITIONS

Report all positions, compensated or uncompensated, held during the current calendar year as an officer, director, trustee of an organization, partner, proprietor, representative, employee, or consultant of any corporation, firm, partnership, or other business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States. For further information, see Instructions, page 26

Exclude: Positions held in any religious, social, fraternal, or political entities, positions solely of an honorary nature, and positions listed on Schedule I.

Position	Organization
Director	News Communications, Inc

SCHEDULE IX -- AGREEMENTS

Identify the date, parties to, and general terms of any agreement or arrangement with respect to: future employment, a leave of absence during the period of government service, continuation or deferral of payments by a former or current employer other than the U.S. Government, or continuing participation in an employee welfare or benefit plan maintained by a former employer. For further information, see Instructions, pages 26-27.

Date	Parties To	Terms of Agreement
5/15/89	Tribco/Queens Tribune/Multi-Media/ Michael Schenkler	Gary L. Ackerman to continue to receive proportionate share of the assets, including the accounts receivable, of the Flushing Tribune, Inc., and Multi-Media, Inc., until all assets are paid.

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1997

FORM A
For use by Members, officers, and employees

98 MAY 15 PM 5:03

OFFICE OF THE CLERK
U.S. HOUSE OF REPRESENTATIVES

HAND DELIVERED
(Office Use Only)

Robert Brown Aderholt
(Full Name)

Post Office Box 323
(Mailing Address)

Daytime Telephone

Haleyville, Alabama 35565-0323

Filer Status [X] Member of the U.S. House of Representatives — State Alabama, District 4th — [ ] Officer or Employee — Employing Office

Report Type [X] Annual (May 15) — [ ] Amendment — [ ] Termination — Termination Date

A *$200 penalty* shall be assessed against anyone who files more than 30 days late.

PRELIMINARY INFORMATION — ANSWER EACH OF THESE QUESTIONS

I. Did you or your spouse have "earned" income (e.g. salaries or fees) of $200 or more from any source in the reporting period? **If yes, complete and attach Schedule I.** — Yes [X] No [ ]

II. Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? **If yes, complete and attach Schedule II.** — Yes [ ] No [X]

III. Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? **If yes, complete and attach Schedule III.** — Yes [X] No [ ]

IV. Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset worth more than $1,000 in the reporting period? **If yes, complete and attach Schedule IV.** — Yes [X] No [ ]

V. Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? **If yes, complete and attach Schedule V.** — Yes [X] No [ ]

VI. Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $250 and not otherwise exempt)? **If yes, complete and attach Schedule VI.** — Yes [ ] No [X]

VII. Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $250 from one source)? **If yes, complete and attach Schedule VII.** — Yes [X] No [ ]

VIII. Did you hold any reportable positions on or before the date of filing in the current calendar year? **If yes, complete and attach Schedule VIII.** — Yes [X] No [ ]

IX. Did you have any reportable agreement or arrangement with an outside entity? **If yes, complete and attach Schedule IX.** — Yes [ ] No [X]

Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION — ANSWER EACH OF THESE QUESTIONS

TRUSTS—Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child? — Yes [ ] No [X]

EXEMPTION—Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption? — Yes [ ] No [X]

CERTIFICATION — THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended. The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct or its designee. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil penalties and criminal sanctions (*See* 5 U.S.C. app. 4, §104 and 18 U.S.C. §1001).

SIGNATURE OF REPORTING INDIVIDUAL: Robert B. Aderholt — DATE (Month/Day/Year): 5/15/98

Name Robert Brown Aderholt	Page 2 of 9

SCHEDULE I — EARNED INCOME

List the source, type, and amount of earned income from any source (other than the filer's current employment by the U.S. Government) totalling $200 or more during the preceding calendar year. For a spouse, list the source and amount of any honoraria; list only the source for other spouse earned income exceeding $1,000.

Source	Type	Amount
Examples Keene State	Approved Teaching Fee	$6,000
State of Maryland	Legislative Pension	$9,000
Civil War Roundtable (Oct. 2nd)	Spouse Speech	$1,000
Ontario County Board of Education	Spouse Salary	NA
Nailfast, Inc.	Salary - Retainer	$5,200

For payments to charity in lieu of honoraria, use Schedule II.

Name Robert Brown Aderholt	Page 3 of 9

SCHEDULE II — PAYMENTS IN LIEU OF HONORARIA MADE TO CHARITY

List the source, activity (i.e., speech, appearance, or article), date, and amount of any payment made by the sponsor of an event to a charitable organization in lieu of an honorarium. A separate confidential list of charities receiving such payments must be filed directly with the Committee on Standards of Official Conduct. An envelope for transmitting the list is included in each Member's filing package

Source	Activity	Date	Amount
Examples Association of American Associations, Wash., D.C.	Speech	Feb. 2, 1997	$2,000
XYZ Magazine	Article	Aug. 13, 1997	$500
N/A			

This page may be copied if more space is required.

Name Robert Brown Aderholt | Page 4 of 9

SCHEDULE III — ASSETS AND "UNEARNED" INCOME

BLOCK A — Asset and/or Income Source

Identify (a) each asset held for investment or production of income with a fair market value exceeding $1,000 at the end of the reporting year, and (b) any other asset or source of income which generated more than $200 in "unearned" income during the year. For rental property or land, provide an address. Provide full names of any mutual funds. For an IRA or retirement plan that is *self-directed*, list the underlying assets worth more than $1,000. For an IRA or retirement plan that is not selfdirected, name the institution holding the account.

Exclude: Your personal residence(s) (unless there is rental income), any debt owed to you by your spouse, or by your or your spouse's child, parent, or sibling, any deposits totalling $5,000 or less in personal savings accounts, any financial interests in or income derived from U.S. Government retirement programs.

If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC) or is jointly held (JT), in the optional column on the far left.

BLOCK B — Value of Asset

at close of reporting year. If you use a valuation method other than fair market value, please specify the method used. If an asset was sold and is included only because it generated income, the value should be "None."

BLOCK C — Type of Income

BLOCK D — Amount of Income

For IRA's and retirement plans that are *not* self-directed, you may write in "NA" for income.

BLOCK E — Transaction

Indicate if asset was purchased (P), sold (S), or exchanged (E) in reporting year

	BLOCK A	BLOCK B												BLOCK C							BLOCK D										BLOCK E
		A None	B $1 – $1,000	C $1,001 – $15,000		E $15,001 – $50,000	F $50,001 – $100,000	G $100,001 – $250,000	H $250,001 – $500,000	I $500,001 – $1,000,000	J $1,000,001 – $5,000,000	K $5,000,001 – $25,000,000	L $25,000,001 – $50,000,000	Over $50,000,000	DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Type of Income (Specify. For Example, Partnership Income or Farm Income)	I None	II $1 – $200	III $201 – $1,000	IV $1,001 – $2,500	V $2,501 – $5,000	VI $5,001 – $15,000	VII $15,001 – $50,000	VIII $50,001 – $100,000	IX $100,001 – $1,000,000	X $1,000,001 – $5,000,000	XI Over $5,000,000	P, S, E
SP, DC, JT	*Examples*		Indefinite			X		X							X		X				Royalties					X			X			P
SP	Mega Corp Stock																															
	Simon & Schuster																															
	1st Bank of Paducah, KY accounts																															
	60 Acres Land Hoggleridge Haleyville, AL				X																Coal Royalties				X							
	Hwy 5 South Commercial Bldg Haleyville							X								X											X					
	IRA-Traders & Farmers Bank			X													X					X										
	IRA-NYLife Securities, Inc				X										X			X				X										
	IRA-New York Life Insurance			X													X					X										

For additional assets and unearned income, use next page.

SCHEDULE III — ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Name: Robert Brown Aderholt

SP DC JT	BLOCK A Asset and/or Income Source	BLOCK B Year-End Value of Asset											BLOCK C Type of Income							BLOCK D Amount of Income										BLOCK E Transaction
		A None	B $1 – $1,000	C $1,001 – $15,000	D $15,001 – $50,000	E $50,001 – $100,000	F $100,001 – $250,000	G $250,001 – $500,000	H $500,001 – $1,000,000	I $1,000,001 – $5,000,000	J $5,000,001 – $25,000,000	K $25,000,001 – $50,000,000	L Over $50,000,000	DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Type of Income (Specify)	I None	II $1 – $200	III $201 – $1,000	IV $1,001 – $2,500	V $2,501 – $5,000	VI $5,001 – $15,000	VII $15,001 – $50,000	VIII $50,001 – $100,000	IX $100,001 – $1,000,000	X $1,000,001 – $5,000,000	XI Over $5,000,000	P, S, E
SP	86.14Acres Land 6800 Madison Huntsville,						X										X									X					E
SP	58.17Acres Land 6802 Madison Huntsville,				X												X				X										
	Bradford Money Market Port.		X											X								X									
SP	Regions Bank		X													X							X								
	Community Bank			X												X						X									
	Congressional Fed. Cr. Un.			X												X						X									
JT	Traders & Farmers Bank			X												X						X									
JT	Common Stock-Allied Signal					X								X										X							
	Common Stock-Glaxo Wellcome			X										X									X								
	Common Stock-H&Q Healthcare		X											X								X									
	Common Stock-Ivax Corp.			X										X							X										
	Common Stock-VLSI Tech., Inc			X										X							X										
	Common Stock-Telefons De Me	X												X							X										E
JT	Common Stock-Navistar Int.			X										X							X										
	Common Stock-Telecom Italia			X										X							X										E

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SCHEDULE IV — TRANSACTIONS

Name Robert Brown Aderholt | Page 6 of 9

Report any purchase, sale, or exchange by you, your spouse, or dependent child during the reporting year of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss Do not report a transaction between you, your spouse, or your dependent child, or the purchase or sale of your personal residence, unless it is rented out.		Type of Transaction			Date	Amount of Transaction									
		PURCHASE	SALE	EXCHANGE	(MO/DAY/YR)	B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H $1,000,001 - $5,000,000	I $5,000,001 - $25,000,000	J $25,000,001 - $50,000,000	K Over $50,000,000
SP, DC, JT	Asset														
SP	*Example* Mega Corporation Common Stock	X			10–12–97		X								
SP	Land Exchange - Huntsville, Alabama			X	01-17-97		X								
SP	Land Exchange - Huntsville, Alabama			X	12-17-97				X						

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SCHEDULE V — LIABILITIES

Report liabilities of over $10,000 owed to any one creditor ***at any time*** during the reporting period by you, your spouse, or dependent child. Mark the highest amount owed during the year. **Exclude:** Any mortgage on your personal residence (unless it is rented out); loans secured by automobiles, household furniture, or appliances, and liabilities owed to a spouse, or the child, parent, or sibling of you or your spouse. Report ***revolving charge accounts*** only if the balance at the end of the reporting period exceeded $10,000.

SP, DC, JT	Creditor	Type of Liability	Amount of Liability										
			B $10,001–$15,000	C $15,001–$50,000	D $50,001–$100,000	E $100,001–$250,000	F $250,001–$500,000	G $500,001–$1,000,000	H $1,000,001–$5,000,000	I $5,000,001–$25,000,000	J $25,000,001–$50,000,000	K Over $50,000,000
	Example First Bank of Wilmington, Delaware	Mortgage on 123 Main St., Dover, Del				X						
JT	Julious Brown Estate	Mortgage on 2nd Home, Montgomery, AL (not principal residence)			X							

SCHEDULE VI — GIFTS

Report the source, a brief description, and the value of all gifts totalling more than $250 received by you, your spouse, or a dependent child from any source during the year.

Exclude: Gifts from relatives, gifts of personal hospitality of an individual, local meals, and gifts to a spouse or dependent child that are totally independent of his or her relationship to you. Gifts with a value of $100 or less need not be added towards the $250 disclosure threshold.

Note: The gift rule (House Rule 51) prohibits gifts except as specifically provided in the rule.

Source	Description	Value
Example Mr. Joseph H. Smith, Anytown, Anystate	Silver Platter (determination on personal friendship received from Committee on Standards)	$270
N/A		

Use additional sheets if more space is required.

LE VII —TRAVEL PAYMENTS AND REIMBURSEMENTS

the source and list travel itinerary, dates, and nature of expenses provided for travel and travel-related expenses totalling more than $250 received by you our spouse, or a dependent child during the reporting period. Indicate whether a family member accompanied the traveler at the sponsor's expense, and the amount of time, if any, that was not at the sponsor's expense. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor

Exclude: Travel-related expenses provided by federal, state, and local governments, or by a foreign government required to be separately reported under the Foreign Gifts and Decorations Act (5 U S.C. § 7342); travel paid for by a Federal political committee; travel provided to a spouse or dependent child that is totally independent of his or her relationship to you.

Source	Date(s)	Point of Departure—Destination—Point of Return	Lodging? (Y/N)	Food? (Y/N)	Was a Family Member Included? (Y/N)	Any time not at sponsor's expense
Examples Chicago Chamber of Commerce	Mar. 2	Wash , D.C —Chicago—Wash., D.C.	N	N	N	N
Roycroft Corporation	Aug. 6–13	Wash , D C —Los Angeles—Cleveland	Y	Y	Y	4 Days
Bipartisan Congressional Retreat	March 7-9	Wash D.C.-Hershey,PA-Wash DC	Y	Y	Y	N
Healthsouth, Inc.	August 1	Wash D.C.-Birmingham, AL	N	N	N	N

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SCHEDULE VIII — POSITIONS

Report all positions, compensated or uncompensated, held during the current calendar year as an officer, director, trustee of an organization, partner, proprietor, representative, employee, or consultant of any corporation, firm, partnership, or other business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States.

Exclude: Positions held in any religious, social, fraternal, or political entities; positions solely of an honorary nature; and positions listed on Schedule I.

Position	Name of Organization
Employee	Nailfast, Inc.

SCHEDULE IX — AGREEMENTS

Identify the date, parties to, and general terms of any agreement or arrangement with respect to: future employment; a leave of absence during the period of government service; continuation or deferral of payments by a former or current employer other than the U.S. Government; or continuing participation in an employee welfare or benefit plan maintained by a former employer.

Date	Parties To	Terms of Agreement
	N/A	

GPO 1998 46–260 (mac)

Use additional sheets if more space is required.

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1997

FORM A
For use by Members, officers, and employees

RECEIVED
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98 MAY 22 PM 2:18
[illegible] REPRESENTATIVES

HAND DELIVERED
(Office Use Only)

(2)

Robert Brown Aderholt
(Full Name)

Post Office Box 323
(Mailing Address)

Haleyville, Alabama 35565-0323

Daytime Telephone

Filer Status
[X] Member of the U.S. House of Representatives — State: Alabama, District: 4th
[ ] Officer or Employee — Employing Office:

Report Type
[ ] Annual (May 15)
[X] Amendment
[ ] Termination — Termination Date:

A *$200 penalty* shall be assessed against anyone who files more than 30 days late.

PRELIMINARY INFORMATION — ANSWER EACH OF THESE QUESTIONS

I. Did you or your spouse have "earned" income (e.g., salaries or fees) of $200 or more from any source in the reporting period? **If yes, complete and attach Schedule I.** — Yes [ ] No [ ]

II. Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? **If yes, complete and attach Schedule II.** — Yes [ ] No [ ]

III. Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? **If yes, complete and attach Schedule III.** — Yes [ ] No [ ]

IV. Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset worth more than $1,000 in the reporting period? **If yes, complete and attach Schedule IV.** — Yes [ ] No [ ]

V. Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? **If yes, complete and attach Schedule V.** — Yes [ ] No [ ]

VI. Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $250 and not otherwise exempt)? **If yes, complete and attach Schedule VI.** — Yes [ ] No [ ]

VII. Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $250 from one source)? **If yes, complete and attach Schedule VII.** — Yes [ ] No [ ]

VIII. Did you hold any reportable positions on or before the date of filing in the current calendar year? **If yes, complete and attach Schedule VIII.** — Yes [ ] No [ ]

IX. Did you have any reportable agreement or arrangement with an outside entity? **If yes, complete and attach Schedule IX.** — Yes [ ] No [ ]

Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION — ANSWER EACH OF THESE QUESTIONS

TRUSTS—Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child? — Yes [ ] No [ ]

EXEMPTION—Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption? — Yes [ ] No [ ]

CERTIFICATION — THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended. The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct or its designee. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil penalties and criminal sanctions (*See* 5 U.S.C. app. 4, §104 and 18 U.S.C. §1001)

SIGNATURE OF REPORTING INDIVIDUAL: Robert B. Aderholt

DATE (Month/Day/Year): 5-22-98

Name	Page
Robert Brown Aderholt	2 of 2

SCHEDULE VII —TRAVEL PAYMENTS AND REIMBURSEMENTS

Identify the source and list travel itinerary, dates, and nature of expenses provided for travel and travel-related expenses totalling more than $250 received by you, your spouse, or a dependent child during the reporting period. Indicate whether a family member accompanied the traveler at the sponsor's expense, and the amount of time, if any, that was not at the sponsor's expense. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor.

Exclude: Travel-related expenses provided by federal, state, and local governments, or by a foreign government required to be separately reported under the Foreign Gifts and Decorations Act (5 U.S.C. § 7342); travel paid for by a Federal political committee; travel provided to a spouse or dependent child that is totally independent of his or her relationship to you

Source	Date(s)	Point of Departure—Destination—Point of Return	Lodging? (Y/N)	Food? (Y/N)	Was a Family Member Included? (Y/N)	Any time not at sponsor's expense
Examples						
Chicago Chamber of Commerce	Mar. 2	Wash., D.C.—Chicago—Wash. D.C.	N	N	N	N
Roycroft Corporation	Aug. 6–13	Wash., D.C.—Los Angeles—Cleveland	Y	Y	Y	4 Days
Bipartisan Congressional Retreat	March 7-9	Wash DC-Hershey,PA-Wash DC	Y	Y	Y	N
AL Republican Party(Healthsouth)	August 1	Wash DC-Birmingham, AL	N	N	N	N
Alabama Republican Party	January 23	Wash DC-Mobile, AL	N	N	Y	N

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ROBERT B. ADERHOLT
4TH DISTRICT, ALABAMA

DISTRICT OFFICES

1710 ALABAMA AVENUE
247 FEDERAL BUILDING
JASPER, AL 35501
TELEPHONE (205) 221-2310

102 FEDERAL BUILDING
CULLMAN, AL 35055
TELEPHONE (205) 734-6043

107 FEDERAL BUILDING
GADSDEN, AL 35901
TELEPHONE (205) 546-0201

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Congress of the United States
House of Representatives
Washington, DC 20515

COMMITTEE ON APPROPRIATIONS

SUBCOMMITTEES
TRANSPORTATION
TREASURY AND POSTAL
DISTRICT OF COLUMBIA

1007 LONGWORTH HOUSE OFFICE BUILDING
WASHINGTON, DC 20515
TELEPHONE (202) 225-4876

June 11, 1998

The Honorable Robin H. Carle
Clerk
U.S. House of Representatives
Legislative Resource Center
B106 Cannon HOB
Washington, D.C. 20515

HAND DELIVERED

MC ✓ (1)

Dear Ms. Carle:

I am writing to clarify some of the items on my annual financial disclosure form, dated May 15, 1998.

On Schedule III (Assets and "Unearned Income" -- page 5), the line item regarding Glaxo Wellcome needs to be clarified. In 1995, I sold 300 shares of Glaxo Wellcome PLC stock which was being held by Gruntal & Co., Inc. The stock was purchased during 1991, and incurred a stock split between the purchasing date and the sale date (increasing the shares from 150 to 300). It was mistakenly believed that all Glaxo Wellcome stock, held by myself, was sold in 1995.

However, in 1997 I received a stock dividend on Glaxo Wellcome PLC stock, of $268.82, from the Bank of New York, indicating that additional shares are still owned. Since the 300 shares were sold in 1995 and no dividend was reported by custodian of funds in 1996, the stock was erroneously omitted from the 1996 Financial Disclosure Statement. In 1997, consistent with FORM 1099-DIV submitted by the custodian of funds, the amount was included correctly on the Financial Disclosure Statement.

Also, on Schedule III (Assets and "Unearned Income" -- page 5), the line item regarding Telecom Italia was incorrectly listed in Block E as an exchange, when in fact it was a purchase. The amount of this transaction should also have been listed on Schedule IV (Transactions -- page 6), and noted in Column B as falling between $1,001 and $15,000.

Lastly, the land exchange which is reflected on Schedule IV (Transactions -- page 6), is in relation to the top two line items on Schedule III (Assets and "Unearned Income" -- page 5).

I apologize for any confusion regarding these items, and hope this letter clarifies the situation. If you have any questions, please do not hesitate to contact me. I will be happy to get the information you may need.

Sincerely,

Robert Aderholt
Member of Congress

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1997

FORM A
For use by Members, officers, and employees

98 MAY 14 PM 12:27

OFFICE OF FILES
U.S. HOUSE OF REPRESENTATIVES

(5)

HAND DELIVERED
(Office Use Only)

THOMAS H. ALLEN
(Full Name)

17 FAIRMOUNT ST
(Mailing Address)

PORTLAND ME 04103

Daytime Telephone
202 225-6116
207 774-5019

Filer Status: [X] Member of the U.S. House of Representatives — State ME, District 1 — [ ] Officer or Employee — Employing Office:

Report Type: [X] Annual (May 15) — [ ] Amendment — [ ] Termination — Termination Date

A *$200 penalty* shall be assessed against anyone who files more than 30 days late.

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VI. Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $250 and not otherwise exempt)?
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IX. Did you have any reportable agreement or arrangement with an outside entity?
If yes, complete and attach Schedule IX. — Yes [ ] No [X]

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EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION — ANSWER EACH OF THESE QUESTIONS

TRUSTS—Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child? — Yes [ ] No [X]

EXEMPTION—Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption? — Yes [ ] No [X]

CERTIFICATION — THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended. The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct or its designee. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil penalties and criminal sanctions (*See* 5 U.S.C. app. 4, §104 and 18 U.S.C. §1001).

SIGNATURE OF REPORTING INDIVIDUAL: Thomas H. Allen

DATE (Month/Day/Year): 5/14/98

SCHEDULE III — ASSETS AND "UNEARNED" INCOME

Name TOM ALLEN   Page 2 of 5

BLOCK A — Asset and/or Income Source
Identify (a) each asset held for investment or production of income with a fair market value exceeding $1,000 at the end of the reporting year, and (b) any other asset or source of in come which generated more than $200 in "unearned" income during the year. For rental property or land, provide an address. Provide full names of any mutual funds. For an IRA or retirement plan that is *self-directed*, list the underlying assets worth more than $1,000. For an IRA or retirement plan that is not selfdirected, name the institution holding the account.

Exclude: Your personal residence(s) (unless there is rental income), any debt owed to you by your spouse, or by your or your spouse's child, parent, or sibling, any deposits totalling $5,000 or less in personal savings accounts, any financial interests in or income derived from U S Government retirement programs.

If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC) or is jointly held (JT), in the optional column on the far left.

BLOCK B — Value of Asset
at close of reporting year
If you use a valuation method other than fair market value, please specify the method used. If an asset was sold and is included only because it generated income, the value should be "None."

BLOCK C — Type of Income

BLOCK D — Amount of Income
For IRA's and retirement plans that are *not* self-directed, you may write in "NA" for income

BLOCK E — Transaction
Indicate if asset was purchased (P), sold (S), or exchanged (E) in reporting year.

SP, DC, JT	Block A: Asset and/or Income Source	B-A None	B-B $1 – $1,000	B-C $1,001 – $15,000	B $15,001 – $50,000	B-E $50,001 – $100,000	B-F $100,001 – $250,000	B-G $250,001 – $500,000	B-H $500,001 – $1,000,000	B-I $1,000,001 – $5,000,000	B-J $5,000,001 – $25,000,000	B-K $25,000,001 – $50,000,000	B-L Over $50,000,000	C: DIVIDENDS	C: RENT	C: INTEREST	C: CAPITAL GAINS	C: EXCEPTED TRUST	C: QUALIFIED BLIND TRUST	C: Other Type of Income (Specify For Example, Partnership Income or Farm Income)	D-I None	D-II $1 – $200	D-III $201 – $1,000	D-IV $1,001 – $2,500	D-V $2,501 – $5,000	D-VI $5,001 – $15,000	D-VII $15,001 – $50,000	D-VIII $50,001 – $100,000	D-IX $100,001 – $1,000,000	D-X $1,000,001 – $5,000,000	D-XI Over $5,000,000	E: P, S, E
SP	Examples: Mega Corp Stock					X								X										X								P
DC	Examples: Simon & Schuster		Indefinite																	Royalties									X			
JT	Examples: 1st Bank of Paducah KY accounts						X									X										X						
	AMERICAN MUTUAL FUND						X							X			X									X						
	MAINE MUNI BOND BK 11/1/02			X												X							X									
	MAINE ST BOND 12/15/02			X												X							X									
	M LYNCH VENT. PARTS.		X											X		X						X										
	245 COMMERCIAL ST PORTLAND ME (5.897% INTEREST)						X								X						X											

For additional assets and unearned income, use next page.

SCHEDULE III — ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Name TOM ALLEN | Page 3 of 5

BLOCK A	BLOCK B												BLOCK C						BLOCK D										BLOCK E
Asset and/or Income Source	Year-End Value of Asset												Type of Income						Amount of Income										Transaction
SP. DC. JT	A None	B $1 – $1,000	C $1,001 – $15,000	D $15,001 – $50,000	E $50,001 – $100,000	F $100,001 – $250,000	G $250,001 – $500,000	H $500,001 – $1,000,000	I $1,000,001 – $5,000,000	J $5,000,001 – $25,000,000	K $25,000,001 – $50,000,000	L Over $50,000,000	DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Type of Income (Specify)	I None	II $1 – $200	III $201 – $1,000	IV $1,001 – $2,500	V $2,501 – $5,000	VI $5,001 – $15,000	VII $15,001 – $50,000	VIII $50,001 – $100,000	IX $100,001 – $1,000,000	X $1,000,001 – $5,000,000	XI Over $5,000,000	P, S, E
DRUMMOND WOODSUM PS PLAN + TRUST W/ UMB BK OF KANSAS CITY MO							X						N/A																
ICMA RETIRE. CORP			X										N/A																

This page may be copied if more space is required.

Name TOM ALLEN | Page 4 of 5

SCHEDULE V — LIABILITIES

Report liabilities of over $10,000 owed to any one creditor ***at any time*** during the reporting period by you, your spouse, or dependent child. Mark the highest amount owed during the year **Exclude**: Any mortgage on your personal residence (unless it is rented out), loans secured by automobiles, household furniture, or appliances; and liabilities owed to a spouse, or the child, parent, or sibling of you or your spouse. Report ***revolving charge accounts*** only if the balance at the end of the reporting period exceeded $10,000

SP, DC, JT	Creditor	Type of Liability	Amount of Liability									
			B $10,001–$15,000	C $15,001–$50,000	D $50,001–$100,000	E $100,001–$250,000	F $250,001–$500,000	G $500,001–$1,000,000	H $1,000,001–$5,000,000	I $5,000,001–$25,000,000	J $25,000,001–$50,000,000	K Over $50,000,000
	Example First Bank of Wilmington, Delaware	Mortgage on 123 Main St., Dover, Del.				X						
	FLEET BANK OF MAINE	MORTGAGE ON 145 COMMERCIAL ST PORTLAND ME (5.497% SHARE)				X						

SCHEDULE VI — GIFTS

Report the source, a brief description, and the value of all gifts totalling more than $250 received by you, your spouse, or a dependent child from any source during the year

Exclude: Gifts from relatives, gifts of personal hospitality of an individual, local meals, and gifts to a spouse or dependent child that are totally independent of his or her relationship to you. Gifts with a value of $100 or less need not be added towards the $250 disclosure threshold

Note: The gift rule (House Rule 51) prohibits gifts except as specifically provided in the rule.

Source	Description	Value
Example Mr. Joseph H. Smith, Anytown, Anystate	Silver Platter (determination on personal friendship received from Committee on Standards)	$270
N/A		

Use additional sheets if more space is required.

Name TOM ALLEN | Page 5 of 5

SCHEDULE VII —TRAVEL PAYMENTS AND REIMBURSEMENTS

Identify the source and list travel itinerary, dates, and nature of expenses provided for travel and travel-related expenses totalling more than $250 received by you, your spouse, or a dependent child during the reporting period. Indicate whether a family member accompanied the traveler at the sponsor's expense, and the amount of time, if any, that was not at the sponsor's expense. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor

Exclude: Travel-related expenses provided by federal, state, and local governments, or by a foreign government required to be separately reported under the Foreign Gifts and Decorations Act (5 U S C § 7342); travel paid for by a Federal political committee; travel provided to a spouse or dependent child that is totally independent of his or her relationship to you.

Source	Date(s)	Point of Departure—Destination—Point of Return	Lodging? (Y/N)	Food? (Y/N)	Was a Family Member Included? (Y/N)	Any time not at sponsor's expense
Examples: Chicago Chamber of Commerce	Mar 2	Wash , D C —Chicago—Wash , D C	N	N	N	N
Roycroft Corporation	Aug 6–13	Wash , D C —Los Angeles—Cleveland	Y	Y	Y	4 Days
ASPEN INSTITUTE	MAR 7-9, 1997	WASH DC - HERSEY PA - WASH DC	Y	Y	Y	N
AMER. ISRAEL EDUC. FOUNDATION	AUG. 7-10, 1997	N Y - ISRAEL - N Y	Y	Y	Y	N

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UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1997

FORM A
For use by Members, officers, and employees

RECEIVED
98 MAY 18 PM 3:06

MAY 14 1998 (9)
(Office Use Only)

Robert E. Andrews
(Full Name)

215 Fourth Avenue
Haddon Heights, New Jersey 08035
(Mailing Address)

(609) 546-5100
Daytime Telephone

Filer Status	[X] Member of the U.S. House of Representatives	State NJ District 01	[ ] Officer or Employee	Employing Office	
Report Type	[X] Annual (May 15)	[ ] Amendment	[ ] Termination	Termination Date	

A *$200 penalty* shall be assessed against anyone who files more than 30 days late.

PRELIMINARY INFORMATION — ANSWER EACH OF THESE QUESTIONS

I. Did you or your spouse have "earned" income (e.g., salaries or fees) of $200 or more from any source in the reporting period? **If yes, complete and attach Schedule I.**	Yes [X]	No [ ]	VI. Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $250 and not otherwise exempt)? **If yes, complete and attach Schedule VI.**	Yes [ ]	No [X]
II. Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? **If yes, complete and attach Schedule II.**	Yes [ ]	No [X]	VII. Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $250 from one source)? **If yes, complete and attach Schedule VII.**	Yes [X]	No [ ]
III. Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? **If yes, complete and attach Schedule III.**	Yes [X]	No [ ]	VIII. Did you hold any reportable positions on or before the date of filing in the current calendar year? **If yes, complete and attach Schedule VIII.**	Yes [ ]	No [X]
IV. Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset worth more than $1,000 in the reporting period? **If yes, complete and attach Schedule IV.**	Yes [ ]	No [X]	IX. Did you have any reportable agreement or arrangement with an outside entity? **If yes, complete and attach Schedule IX.**	Yes [ ]	No [X]
V. Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? **If yes, complete and attach Schedule V.**	Yes [ ]	No [X]	**Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.**		

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION — ANSWER EACH OF THESE QUESTIONS

TRUSTS—Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child?	Yes [ ]	No [X]
EXEMPTION—Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption?	Yes [ ]	No [X]

CERTIFICATION — THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended. The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct or its designee. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil penalties and criminal sanctions (*See* 5 U.S.C. app. 4, §104 and 18 U.S.C. §1001)

SIGNATURE OF REPORTING INDIVIDUAL: Robert E. Andrews

DATE (Month/Day/Year): 5/14/98

Name Robert E. Andrews	Page 1 of 8

SCHEDULE I — EARNED INCOME

List the source, type, and amount of earned income from any source (other than the filer's current employment by the U.S. Government) totalling $200 or more during the preceding calendar year. For a spouse, list the source and amount of any honoraria; list only the source for other spouse earned income exceeding $1,000.

	Source	Type	Amount
Examples	Keene State	Approved Teaching Fee	$6,000
	State of Maryland	Legislative Pension	$9,000
	Civil War Roundtable (Oct 2nd)	Spouse Speech	$1,000
	Ontario County Board of Education	Spouse Salary	NA
	Rutgers -- The State University of New Jersey	Spouse Salary	NA

For payments to charity in lieu of honoraria, use Schedule II.

Name Robert E. Andrews	Page 2 of 8

SCHEDULE II — PAYMENTS IN LIEU OF HONORARIA MADE TO CHARITY

List the source, activity (i.e., speech, appearance, or article), date, and amount of any payment made by the sponsor of an event to a charitable organization in lieu of an honorarium. A separate confidential list of charities receiving such payments must be filed directly with the Committee on Standards of Official Conduct. An envelope for transmitting the list is included in each Member's filing package.

	Source	Activity	Date	Amount
Examples	Association of American Associations, Wash., D.C.	Speech	Feb. 2, 1997	$2,000
	XYZ Magazine	Article	Aug. 13, 1997	$500
	N/A			

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SCHEDULE III — ASSETS AND "UNEARNED" INCOME

BLOCK A — Asset and/or Income Source

Identify (a) each asset held for investment or production of income with a fair market value exceeding $1,000 at the end of the reporting year, and (b) any other asset or source of income which generated more than $200 in "unearned" income during the year. For rental property or land, provide an address. Provide full names of any mutual funds. For an IRA or retirement plan that is *self directed*, list the underlying assets worth more than $1,000. For an IRA or retirement plan that is not self-directed, name the institution holding the account.

Exclude: Your personal residence(s) (unless there is rental income), any debt owed to you by your spouse, or by your or your spouse's child, parent, or sibling, any deposits totalling $5,000 or less in personal savings accounts, any financial interests in or income derived from U.S. Government retirement programs.

If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC) or is jointly held (JT), in the optional column on the far left.

BLOCK B — Value of Asset (at close of reporting year. If you use a valuation method other than fair market value, please specify the method used. If an asset was sold and is included only because it generated income, the value should be "None.")

BLOCK C — Type of Income

BLOCK D — Amount of Income (For IRA's and retirement plans that are *not* self-directed, you may write in "NA" for income)

BLOCK E — Transaction (Indicate if asset was purchased (P), sold (S), or exchanged (E) in reporting year)

	BLOCK A	BLOCK B: A None	B $1 – $1,000	C $1,001 – $15,000	D $15,001 – $50,000	E $50,001 – $100,000	F $100,001 – $250,000	G $250,001 – $500,000	H $500,001 – $1,000,000	I $1,000,001 – $5,000,000	J $5,000,001 – $25,000,000	K $25,000,001 – $50,000,000	L Over $50,000,000	BLOCK C: DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Type of Income (Specify. For Example: Partnership Income or Farm Income)	BLOCK D: I None	II $1 – $200	III $201 – $1,000	IV $1,001 – $2,500	V $2,501 – $5,000	VI $5,001 – $15,000	VII $15,001 – $50,000	VIII $50,001 – $100,000	IX $100,001 – $1,000,000	X $1,000,001 – $5,000,000	XI Over $5,000,000	BLOCK E
SP														X																		P
DC	*Examples*			Indefinite																												
JT							X									X										X				X		
	Olive B. Andrews Testamentary Trust (50% remainder interest in Life Estate) NOTE: This trust was not created by the reporting individual and the reporting individual has no specific knowledge of the holdings in the trust.			X														X			X											

For additional assets and unearned income, use next page.

SCHEDULE III — ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Name Robert E. Andrews | Page 4 of 8

SP, DC, JT	BLOCK A Asset and/or Income Source	BLOCK B Year-End Value of Asset											BLOCK C Type of Income							BLOCK D Amount of Income										BLOCK E Transaction
		A None	B $1 – $1,000	C $1,001 – $15,000	D $15,001 – $50,000	E $50,001 – $100,000	F $100,001 – $250,000	G $250,001 – $500,000	H $500,001 – $1,000,000	I $1,000,001 – $5,000,000	J $5,000,001 – $25,000,000	K $25,000,001 – $50,000,000	L Over $50,000,000	DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Type of Income (Specify)	I None	II $1 – $200	III $201 – $1,000	IV $1,001 – $2,500	V $2,501 – $5,000	VI $5,001 – $15,000	VII $15,001 – $50,000	VIII $50,001 – $100,000	IX $100,001 – $1,000,000	X $1,000,001 – $5,000,000	XI Over $5,000,000	P, S, E
JT	Mellon Bank Checking Acct			X												X							X							
JT	PNC Natl Bank Checking Acct				X											X							X							
SP	Stock -- GTE			X										X									X							
SP	Stock -- Connectiv			X										X									X							
JT	Dean Witter Money Mkt Acct				X											X							X							
JT	1105 Creek Road, Bellmawr, NJ 08031					X								Inherited from the Estate of Josephine Andrews (mother)																	

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SCHEDULE IV — TRANSACTIONS

Name Robert E. Andrews

SP, DC, JT	Asset	Type of Transaction: PURCHASE	SALE	EXCHANGE	Date (MO/DAY/YR)	Amount of Transaction: B $1,001–$15,000	C $15,001–$50,000	D $50,001–$100,000	E $100,001–$250,000	F $250,001–$500,000	G $500,001–$1,000,000	H $1,000,001–$5,000,000	I $5,000,001–$25,000,000	J $25,000,001–$50,000,000	K Over $50,000,000
SP	*Example* Mega Corporation Common Stock	X			10-12-97		X								
	N/A														

Report any purchase, sale, or exchange by you, your spouse, or dependent child during the reporting year of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child, or the purchase or sale of your personal residence, unless it is rented out.

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SCHEDULE V — LIABILITIES

Report liabilities of over $10,000 owed to any one creditor ***at any time*** during the reporting period by you, your spouse, or dependent child. Mark the highest amount owed during the year. **Exclude:** Any mortgage on your personal residence (unless it is rented out), loans secured by automobiles, household furniture, or appliances, and liabilities owed to a spouse, or the child, parent, or sibling of you or your spouse. Report ***revolving charge accounts*** only if the balance at the end of the reporting period exceeded $10,000.

SP, DC, JT	Creditor	Type of Liability	Amount of Liability									
			B $10,001 – $15,000	C $15,001 – $50,000	D $50,001 – $100,000	E $100,001 – $250,000	F $250,001 – $500,000	G $500,001 – $1,000,000	H $1,000,001 – $5,000,000	I $5,000,001 – $25,000,000	J $25,000,001 – $50,000,000	K Over $50,000,000
Example	*First Bank of Wilmington, Delaware*	Mortgage on 123 Main St., Dover, Del				X						
	N/A											

SCHEDULE VI — GIFTS

Report the source, a brief description, and the value of all gifts totalling more than $250 received by you, your spouse, or a dependent child from any source during the year.

Exclude: Gifts from relatives, gifts of personal hospitality of an individual, local meals, and gifts to a spouse or dependent child that are totally independent of his or her relationship to you. Gifts with a value of $100 or less need not be added towards the $250 disclosure threshold.

Note: The gift rule (House Rule 51) prohibits gifts except as specifically provided in the rule.

Source	Description	Value
Example: Mr. Joseph H. Smith, Anytown, Anystate	Silver Platter (determination on personal friendship received from Committee on Standards)	$270
N/A		

Use additional sheets if more space is required.

SCHEDULE VII —TRAVEL PAYMENTS AND REIMBURSEMENTS

Identify the source and list travel itinerary, dates, and nature of expenses provided for travel and travel-related expenses totalling more than $250 received by you, your spouse, or a dependent child during the reporting period. Indicate whether a family member accompanied the traveler at the sponsor's expense, and the amount of time, if any, that was not at the sponsor's expense. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor.

Exclude: Travel-related expenses provided by federal, state, and local governments, or by a foreign government required to be separately reported under the Foreign Gifts and Decorations Act (5 U.S.C. § 7342); travel paid for by a Federal political committee; travel provided to a spouse or dependent child that is totally independent of his or her relationship to you.

Source		Date(s)	Point of Departure—Destination—Point of Return	Lodging? (Y/N)	Food? (Y/N)	Was a Family Member Included? (Y/N)	Any time not at sponsor's expense
Examples:	Chicago Chamber of Commerce	Mar 2	Wash., D C —Chicago—Wash., D C.	N	N	N	N
	Roycroft Corporation	Aug. 6–13	Wash., D C —Los Angeles—Cleveland	Y	Y	Y	4 Days
Cyprus Federation of America		Aug 20-28	NYC - Athens, Greece - NYC	Y	Y	Y	N
Amer. Assn. of Cosmetology Schools		Nov 3	Phila. - Miami, FL - Phila.	N	Y	N	N

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SCHEDULE VIII — POSITIONS

Report all positions, compensated or uncompensated, held during the current calendar year as an officer, director, trustee of an organization, partner, proprietor, representative, employee, or consultant of any corporation, firm, partnership, or other business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States.

Exclude: Positions held in any religious, social, fraternal, or political entities; positions solely of an honorary nature; and positions listed on Schedule I.

Position	Name of Organization
N/A	

SCHEDULE IX — AGREEMENTS

Identify the date, parties to, and general terms of any agreement or arrangement with respect to future employment, a leave of absence during the period of government service; continuation or deferral of payments by a former or current employer other than the U.S. Government; or continuing participation in an employee welfare or benefit plan maintained by a former employer

Date	Parties To	Terms of Agreement
	N/A	

GPO: 1998 46-260 (mac)

Use additional sheets if more space is required.

BILL ARCHER
7TH DISTRICT, TEXAS

CHAIRMAN
WAYS AND MEANS
COMMITTEE

JOINT COMMITTEE
ON TAXATION

98 MAY 15 PM 4:34

Congress of the United States
House of Representatives

WASHINGTON OFFICE
1236 LONGWORTH
HOUSE OFFICE BUILDING
WASHINGTON, DC 20515-4307
(202) 225-2571
FAX (202) 225-4381

DISTRICT OFFICE
10000 MEMORIAL DRIVE, SUITE 620
HOUSTON, TX 77024-3490
(713) 682-8823
FAX (713) 680-8070

INTERNET
http://www.house.gov/archer

May 15, 1998

HAND DELIVERED

Honorable Robin H. Carle
Clerk of the House
H-154, The Capitol
Washington, D.C. 20515

MC (9)

Dear Robin:

I would appreciate your assistance in making the enclosed copy of my voluntary December 31, 1997 Financial Statement part of my permanent record along with the enclosed Financial Disclosure Statement for 1997, which is required by law.

Thank you very much, and with best wishes,

Sincerely,

Bill Archer
Member of congress

THIS STATEMENT PRINTED ON PAPER MADE OF RECYCLED FIBERS

FINANCIAL STATEMENT - WILLIAM R. ARCHER, JR. DECEMBER 31, 1997

ASSETS

Certificate of Deposit (F&M Bank of Stanley)		5,000.00
Certificate of Deposit (Tanglewood Bank)		103,500.00
Cash (Cong. Credit Union Acct.)		7,000.00
Cash (Crestar Bank)		98,961.00
Merrill Lynch Cash Management Acct.		689,995.00
Merrill Lynch Cash Management Acct.		125,568.00
I.R.A. (USAA)		152,444.00
Life Insurance Cash Value		9,400.00
Federal Government Retirement Fund		122,492.00
FERS Thrift Savings		93,693.00
Securities (Market Value 12-31-97)		
**1507 shares American General Insurance @ 54.00		81,378.00
*600 shares Halliburton @ 52.00		31,200.00
116 shares Amerada Hess @ 55.00		6,380.00
15,000 shares Caithness Alaska Gold Ltd @ .12		1,800.00
400 shares Microsoft @ 129.00		51,600.00
*1400 shares Intel @ 70.00		98,000.00
1980 shares Bank of Tanglewood @ 14.00		27,720.00
*600 shares Atlantic Richfield @ 80.00		48,000.00
$30,000 U.S. EE Savings Bonds (at cost)		15,000.00
USAA Mutual Fund		110,315.00
PaineWebber CashFund		90,731.00
Municipal Bonds		334,000.00
27% Interest in Archer Associates - Partnership (Partnership in Liquidation)		33,268.00
Real Estate:		528,654.00
Investment Equities - Houston Real Estate (at cost less depreciation)	48,971.00	
Townhouse, Houston, TX (at cost w/spouse)	127,731.00	
House & Acreage - Page County, VA (at cost)	351,952.00	
Mineral Royalty Interest, San Juan, New Mexico (at cost)		2,000.00
1987 Dodge Truck		2,500.00
1990 Ford Taurus		3,000.00
1993 Ford Taurus Station Wagon		11,000.00
Coin Collection (at cost)		16,326.00
TOTAL ASSETS		$2,900,925.00
TOTAL LIABILITIES		00.00

* 1997 Stock Splits
** Formerly U.S. Life which was bought by American General

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1997

FORM A

For use by Members, officers, and employees

98 MAY 15 PM 4:34

William R. Archer, Jr.
(Full Name)

1236 Longworth House Office Building
(Mailing Address)

Washington, D.C. 20515

Daytime Telephone: (202) 225-2571

HAND DELIVERED
(Office Use Only)

Filer Status: [X] Member of the U.S. House of Representatives — State TX, District 07 — [ ] Officer or Employee — Employing Office

Report Type: [X] Annual (May 15) — [ ] Amendment — [ ] Termination — Termination Date

A *$200 penalty* shall be assessed against anyone who files more than 30 days late.

PRELIMINARY INFORMATION — ANSWER EACH OF THESE QUESTIONS

I. Did you or your spouse have earned income (e.g., salaries or fees) of $200 or more from any source in the reporting period?
If yes, complete and attach Schedule I — Yes [ ] No [X]

II. Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period?
If yes, complete and attach Schedule II — Yes [X] No [ ]

III. Did you, your spouse, or a dependent child receive unearned income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period?
If yes, complete and attach Schedule III — Yes [X] No [ ]

IV. Did you, your spouse, or dependent child purchase, sell or exchange any reportable asset worth more than $1,000 in the reporting period?
If yes, complete and attach Schedule IV — Yes [X] No [ ]

V. Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period?
If yes, complete and attach Schedule V — Yes [ ] No [X]

VI. Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $250 and not otherwise exempt)?
If yes, complete and attach Schedule VI. — Yes [ ] No [X]

VII. Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $250 from one source)?
If yes, complete and attach Schedule VII. — Yes [X] No [ ]

VIII. Did you hold any reportable positions on or before the date of filing in the current calendar year?
If yes, complete and attach Schedule VIII — Yes [X] No [ ]

IX. Did you have any reportable agreement or arrangement with an outside entity?
If yes, complete and attach Schedule IX. — Yes [ ] No [X]

Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION — ANSWER EACH OF THESE QUESTIONS

TRUSTS — Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child? — Yes [ ] No [X]

EXEMPTION — Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption? — Yes [ ] No [X]

CERTIFICATION — THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended. The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct or its designee. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil penalties and criminal sanctions (*See* 5 U.S.C. app. 4, §104 and 18 U.S.C. §1001).

SIGNATURE OF REPORTING INDIVIDUAL: William R. Archer

DATE (Month/Day/Year): May 15, 1998

SCHEDULE II -- PAYMENTS IN LIEU OF HONORARIA MADE TO CHARITY

List the source, activity (i.e., speech, appearance, or article), date, and amount of any payment made by the sponsor of an event to a charitable organization in lieu of an honorarium. A separate confidential list of charities receiving such payments must be filed directly with the Committe on Standards of Official Conduct. An envelope for transmitting the list is included in each Member's filing package. For further information, see Instructions, pages 13-14.

Source	Activity	Date	Amount
Examples			
Association of American Associations, Wash., D.C.	Speech	Feb. 2, 1994	$2,000
XYZ Magazine	Article	Aug. 13, 1994	$500
American Council for Capital Formation	Speech	2/26/97	$2,000.00
American Road & Transportation Builders Association	Speech	3/13/97	$2,000.00
Electronic Industries Association	Speech	3/18/97	$2,000.00
Tax Executives Institute	Speech	3/19/97	$2,000.00
National Association for Alternative Staffing, Inc	Speech	6/24/97	$2,000.00

SCHEDULE III -- ASSETS AND "UNEARNED" INCOME

BLOCK A **Asset and/or Income Source** Identify (a) each asset held for investment or production of income with a fair market value exceeding $1,000 at the end of the reporting year, and (b) any other asset or source of income which generated more than $200 in "unearned" income during the year. For rental property or land, provide an address. Provide full names of any mutual funds. For an IRA or retirement plan that is *self-directed*, list the underlying assets worth more than $1,000. For an IRA or retirement plan that is *not* self-directed, name the institution holding the account. **Exclude**: Your personal residence(s) (unless there is rental income), any debt owed to you by your spouse, or by your or your spouse's child, parent, or sibling; any deposits totalling $5,000 or less in personal savings accounts; any financial interests in or income derived from U.S. Government retirement programs. If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC) or is jointly held (JT), in the optional column on the far left. For further information, see Instructions, pages 14-20		BLOCK B **Value of Asset** at close of reporting year If you use a valuation method other than fair market value, please specify the method used. If an asset was sold and is included only because it generated income, the value should be "None."	BLOCK C **Type of Income** If other than one of the listed categories, specify the type of income by writing a brief description in this block	BLOCK D **Amount of Income** For IRA's and retirement plans that are *not* self-directed, you may write in "NA" for income	BLOCK E **Transaction** Indicate if asset was purchased(P), sold(S), or exchanged(E) in reporting year
SP DC, *Examples* JT	SP | Mega Corp. Stock SP | 123 Main St., Dover, Del. 1st Bank of Paducah, KY accounts	$15,001 - $50,000 $250,001 - $500,000 $50,001 - $100,000	Dividends Rent Interest	$201 - $1,000 $1,001 - $2,500 $5,001 - $15,000	P
	Cong. Federal Credit Union	$1,001 - $15,000	Interest	$1 - $200	NA
	CD - Farmers & Mechanics Bank of Stanley	$1,001 - $15,000	Interest	$201 - $1,000	NA
	CD - Tanglewood Bank	$100,001 - $250,000	Interest	$2,501 - $5,000	NA
JT	Crestar Bank	$50,001 - $100,000	Interest	$1,001 - $2,500	NA
SP	Crestar Bank	$1,001 - $15,000	Interest	$201 - $1,000	NA
SP	Charles Schwab & Co - IRA	$1,001 - $15,000	Interest	$201 - $1,000	NA
	American General Insurance (formerly U S Life	$50,001 - $100,000	Dividends	$1,001 - $2,500	E

SCHEDULE III -- ASSETS AND "UNEARNED" INCOME

	* Halliburton - Stock	$15,001 - $50,000	Dividends	$201 - $1,000	Stock Split
	Amerada Hess - Stock	$1,001 - $15,000	Dividends	$1 - $200	NA
	Caithness Alaska Gold Ltd	$1,001 - $15,000	None	None	NA
	Microsoft - Stock	$50,001 - $100,000	Dividends	None	NA
	Intel - Stock	$50,001 - $100,000	Dividends	$1 - $200	NA
	* Atlantic Richfield - Stock	$15,001 - $50,000	Dividends	$1,001 - $2,500	Stock Split
	US EE Savings Bonds	$1,001 - $15,000	None	None	NA
	USAA Mutual Fund	$100,001 - $250,000	Dividends	$2,501 - $5,000	NA
	PaineWebber Cashfund	$50,001 - $100,000	Interest	$5,001 - $15,000	NA
	Municipal Bonds - (Paine Webber Acct)	$250,001 - $500,000	Interest	$5,001 - $15,000	P
JT	Townhouse - Houston, TX	$100,001 - $250,000	Rent	$5,001 - $15,000	NA
	Archer Associates - Family Partnership	$15,001 - $50,000	Dividends & Interest	$201 - $1,000	Distributions in liquidation
	San Juan, NM - Mineral Royalty Interest	$1,001 - $15,000	Interest	$2,501 - $5,000	NA
JT	Merrill Lynch CMA Acct #1 & 2	$500,001 - $1,000,000	Dividends	$15,001 - $50,000	NA
	Real Estate Partnership - Houston Westwood Shopping Ctr . 1/5% Interest	$1,001 - $15,000	Interest	$1 - $200	NA
	Real Estate Partnership - Houston Meadowlake Estates - 6 25% Interest	$1,001 - $15,000	None	$1 - $200	NA
	Real Estate Partnership - Houston Howard Chen	$15,001 - $50,000	None	None	NA
	USAA - IRA	$100,001 - $250,000	Interest	$5,001 - $15,000	NA
	Bank of Tanglewood - Stock	$15,001 - $50,000	none	None	NA

SCHEDULE IV -- TRANSACTIONS

Report any purchase, sale, or exchange by you, your spouse, or dependent child during the reporting year of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child, or the purchase or sale of your personal residence, unless it is rented out. For further information, see Instructions, pages 20-21.

SP,DC,JT	Asset	Type of Transaction	Date	Amount of Transaction
Example	Mega Corporation Common Stock	Purchase	10/12/94	$15,001 - $50,000
	Entergy - Stock	Sold	5/16/97	$1,001 - $15,000
	Treasury Securities	Sold	1/2 & 6/19/97	$100,001 - $250,000
	Municipal Bonds	Purchase	3/19 & 3/21/97	$100,001 - $250,000
	American General Insurance - Stock (formerly U.S. Life)	Exchange	6/17/97	$50,001 - $100,000

SCHEDULE VII -- TRAVEL PAYMENTS AND REIMBURSEMENTS

Identify the source and list travel itinerary, dates, and nature of expenses provided for travel and travel-related expenses totalling more than $250 received by you, your spouse, or a dependent child during the reporting period. Indicate whether a family member accompanied the traveler at the sponsor's expense, and the amount of time, if any, that was not at the sponsor's expense. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor.
Exclude: Travel-related expenses provided by federal, state and local governments, or by a foreign government required to be separately reported under the Foreign Gifts and Decorations Act (5 U.S.C. 7342); travel paid for by a Federal political committee; travel provided to a spouse or dependent child that is totally independent of his or her relationship to you. For further information, see Instructions, pages 24-26.

Source	Date(s)	Point of Departure–Destination–Point of Return	Lodging? (Y/N)	Food? (Y/N)	Was a Family Member Included? (Y/N)	Any time not at sponsor's expense
Examples Chicago Chamber of Commerce	Mar 2	Wash., D.C.-Chicago-Wash., D.C.	N	N	N	N
Mega Corporation	Aug 6-13	Wash., D.C.-Los Angeles-Cleveland	Y	Y	Y	4 Days
Corporate Council on Africa	1/9 - 1/18/97	D.C. - Congo (Brazzaville) - D.C.	Y	Y	Y	None
Congressional Institute	2/21 - 2/23/97	D.C. - VA - D.C.	Y	Y	N	None
Asia Pacific Exchange Foundation (USIA approved cultural exchange)	5/23 - 5/29/97	D.C. - Tashkent - D.C.	Y	Y	Y	None

SCHEDULE VIII -- POSITIONS

Report all positions, compensated or uncompensated, held during the current calendar year as an officer, director, trustee of an organization, partner, proprietor, representative, employee, or consultant of any corporation, firm, partnership, or other business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States. For further information, see Instructions, page 26.

Exclude... Positions held in any religious, social, fraternal, or political entities, positions solely of an honorary nature, and positions listed on Schedule I.

Position	Organization
Director	Houston Society for the Prevention of Cruelty to Animals
Partner	Archer Associate Partnership

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1997

FORM A
For use by Members, officers, and employees

98 MAY -1 PM 5:20

(6)

Richard K. Armey
(Full Name)

9456 East Valley Ranch Pkwy.
(Mailing Address)

Irving, Texas 75063

Daytime Telephone
202/225-4000

HAND DELIVERED
MA (Office Use Only)

Filer Status	[X] Member of the U S House of Representatives	State Texas District 26	[ ] Officer or Employee	Employing Office	
Report Type	[X] Annual (May 15)	[ ] Amendment		[ ] Termination	Termination Date

A *$200 penalty* shall be assessed against anyone who files more than 30 days late.

PRELIMINARY INFORMATION — ANSWER EACH OF THESE QUESTIONS

I Did you or your spouse have "earned" income (e g , salaries or fees) of $200 or more from any source in the reporting period? **If yes, complete and attach Schedule I.**	Yes [X]	No [ ]	VI Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i e , aggregating more than $250 and not otherwise exempt)? **If yes, complete and attach Schedule VI.**	Yes [ ]	No [X]
II Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? **If yes, complete and attach Schedule II.**	Yes [ ]	No [X]	VII Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $250 from one source)? **If yes, complete and attach Schedule VII.**	Yes [X]	No [ ]
III Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? **If yes, complete and attach Schedule III.**	Yes [X]	No [ ]	VIII Did you hold any reportable positions on or before the date of filing in the current calendar year? **If yes, complete and attach Schedule VIII.**	Yes [ ]	No [X]
IV Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset worth more than $1,000 in the reporting period? **If yes, complete and attach Schedule IV.**	Yes [ ]	No [X]	IX Did you have any reportable agreement or arrangement with an outside entity? **If yes, complete and attach Schedule IX.**	Yes [ ]	No [X]
V Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? **If yes, complete and attach Schedule V.**	Yes [X]	No [ ]	Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.		

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION — ANSWER EACH OF THESE QUESTIONS

TRUSTS—Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child?	Yes [ ]	No [X]
EXEMPTION--Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption?	Yes [ ]	No [X]

CERTIFICATION — THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended. The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct or its designee. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil penalties and criminal sanctions (*See* 5 U.S.C. app. 4, §104 and 18 U.S.C. §1001)

SIGNATURE OF REPORTING INDIVIDUAL — Dick Armey

DATE (Month/Day/Year) — 5-1-98

Name Richard K. Armey	Page 2 of 6

SCHEDULE I — EARNED INCOME

List the source, type, and amount of earned income from any source (other than the filer's current employment by the U.S. Government) totalling $200 or more during the preceding calendar year. For a spouse, list the source and amount of any honoraria, list only the source for other spouse earned income exceeding $1,000.

	Source	Type	Amount
Examples	Keene State	Approved Teaching Fee	$6,000
	State of Maryland	Legislative Pension	$9,000
	Civil War Roundtable (Oct 2nd)	Spouse Speech	$1,000
	Ontario County Board of Education	Spouse Salary	NA
	Teachers Insurance and Annuity Association	Teacher's Retirement	$ 21'00.00

For payments to charity in lieu of honoraria, use Schedule II.

SCHEDULE III — ASSETS AND "UNEARNED" INCOME

BLOCK A — Asset and/or Income Source

Identify (a) each asset held for investment or production of income with a fair market value exceeding $1,000 at the end of the reporting year, and (b) any other asset or source of income which generated more than $200 in "unearned" income during the year. For rental property or land, provide an address. Provide full names of any mutual funds. For an IRA or retirement plan that is *self directed*, list the underlying assets worth more than $1,000. For an IRA or retirement plan that is not selfdirected, name the institution holding the account.

Exclude: Your personal residence(s) (unless there is rental income), any debt owed to you by your spouse, or by your or your spouse's child, parent, or sibling, any deposits totalling $5,000 or less in personal savings accounts, any financial interests in or income derived from U.S. Government retirement programs.

If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC) or is jointly held (JT), in the optional column on the far left.

SP	*Examples*	SP	Mega Corp. Stock
DC			Simon & Schuster
JT			1st Bank of Paducah, KY accounts

BLOCK B — Value of Asset

at close of reporting year

If you use a valuation method other than fair market value, please specify the method used. If an asset was sold and is included only because it generated income, the value should be "None."

	A	B	C		E	F	G	H	I	J	K	L
	None	$1 – $1,000	$1,001 – $15,000	$15,001 – $50,000	$50,001 – $100,000	$100,001 – $250,000	$250,001 – $500,000	$500,001 – $1,000,000	$1,000,001 – $5,000,000	$5,000,001 – $25,000,000	$25,000,001 – $50,000,000	Over $50,000,000
Examples		Indefinite			X							
						X						
Congressional Federal Credit Union			X									

BLOCK C — Type of Income

	DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Type of Income (Specify. For Example, Partnership Income or Farm Income)
Examples	X						
			X				
							Royalties

BLOCK D — Amount of Income

For IRA's and retirement plans that are *not* self-directed, you may write in "NA" for income.

	I	II	III	IV	V	VI	VII	VIII	IX	X	XI
	None	$1 – $200	$201 – $1,000	$1,001 – $2,500	$2,501 – $5,000	$5,001 – $15,000	$15,001 – $50,000	$50,001 – $100,000	$100,001 – $1,000,000	$1,000,001 – $5,000,000	Over $5,000,000
Examples				X							
						X					
									X		

BLOCK E — Transaction

Indicate if asset was purchased (P), sold (S), or exchanged (E) in reporting year

P, S, E
P

For additional assets and unearned income, use next page.

SCHEDULE V — LIABILITIES

Report liabilities of over $10,000 owed to any one creditor ***at any time*** during the reporting period by you, your spouse, or dependent child. Mark the highest amount owed during the year. **Exclude:** Any mortgage on your personal residence (unless it is rented out), loans secured by automobiles, household furniture, or appliances, and liabilities owed to a spouse, or the child, parent, or sibling of you or your spouse. Report ***revolving charge accounts*** only if the balance at the end of the reporting period exceeded $10,000.

SP, DC, JT	Creditor	Type of Liability	Amount of Liability									
			B $10,001 – $15,000	C $15,001 – $50,000	D $50,001 – $100,000	E $100,001 – $250,000	F $250,001 – $500,000	G $500,001 – $1,000,000	H $1,000,001 – $5,000,000	I $5,000,001 – $25,000,000	J $25,000,001 – $50,000,000	K Over $50,000,000
	Example First Bank of Wilmington, Delaware	Mortgage on 123 Main St., Dover, Del.				X						
	Wells Fargo, Euless, Texas	Line of Credit		X								

SCHEDULE VI — GIFTS

Report the source, a brief description, and the value of all gifts totalling more than $250 received by you, your spouse, or a dependent child from any source during the year.

Exclude: Gifts from relatives, gifts of personal hospitality of an individual, local meals, and gifts to a spouse or dependent child that are totally independent of his or her relationship to you. Gifts with a value of $100 or less need not be added towards the $250 disclosure threshold.

Note: The gift rule (House Rule 51) prohibits gifts except as specifically provided in the rule.

Source	Description	Value
Example Mr. Joseph H. Smith, Anytown, Anystate	Silver Platter (determination on personal friendship received from Committee on Standards)	$270

Use additional sheets if more space is required.

Name	Richard K. Armey	Page 5 of 6

SCHEDULE VII —TRAVEL PAYMENTS AND REIMBURSEMENTS

Identify the source and list travel itinerary, dates, and nature of expenses provided for travel and travel-related expenses totalling more than $250 received by you, your spouse, or a dependent child during the reporting period. Indicate whether a family member accompanied the traveler at the sponsor's expense, and the amount of time, if any, that was not at the sponsor's expense. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor.

Exclude: Travel-related expenses provided by federal, state, and local governments, or by a foreign government required to be separately reported under the Foreign Gifts and Decorations Act (5 U.S.C. § 7342), travel paid for by a Federal political committee; travel provided to a spouse or dependent child that is totally independent of his or her relationship to you.

Source	Date(s)	Point of Departure—Destination—Point of Return	Lodging? (Y/N)	Food? (Y/N)	Was a Family Member Included? (Y/N)	Any time not at sponsor's expense
Examples: Chicago Chamber of Commerce	Mar. 2	Wash., D.C.—Chicago—Wash., D.C.	N	N	N	N
Roycroft Corporation	Aug 6–13	Wash., D.C.—Los Angeles—Cleveland	Y	Y	Y	4 Days
Congressional Institute (Member Conference)	Jan. 21–23	Wash., DC-Warrenton, VA RT	N	Y	N	N
Congressional Institute (Member Conference)	Mar. 7–8	Wash., DC-Hershey, PA RT	Y	Y	N	N
Institute for Policy INnovation (Editorial Board)	March 17	Wash., DC-New York, NY RT	N	N	N	N
Western States Coalition (Resources study)	Aug. 27–31	Wash., DC-Salt Lake City, UT -Boise, ID-W. Yellowstone-Casper, WY	Y	Y	Y	N
Citizens for a Sound Economy Four (Tax Tour)	Oct. 10–12	Columbus, OH-Cincinnati, OH -Bakersfield, CA-Dallas, TX	Y	Y	N	N
Citizens for a Sound Economy Four (Tax Tour)	Oct. 16–18	Atlanta, GA-Chicago, IL-Wash., DC	Y	Y	N	N

This page may be copied if more space is required.

Name Richard K. Armey	Page 6 of 6

SCHEDULE VII —TRAVEL PAYMENTS AND REIMBURSEMENTS

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Source	Date(s)	Point of Departure—Destination—Point of Return	Lodging? (Y/N)	Food? (Y/N)	Was a Family Member Included? (Y/N)	Any time not at sponsor's expense
Examples Chicago Chamber of Commerce	Mar. 2	Wash., D.C.—Chicago—Wash., D.C.	N	N	N	N
Roycroft Corporation	Aug. 6–13	Wash., D.C.—Los Angeles—Cleveland	Y	Y	Y	4 Days.
Citizens for a Sound Economy Foun	Dec. 8	Dallas, TX--Oklahoma City-	N	Y	N	N
		Phoenix, AZ RT				

This page may be copied if more space is required.

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1997

FORM A

For use by Members, officers, and employees

RECEIVED
'98 MAY 15 PM 2:47

HAND DELIVERED (17)

MC

(Office Use Only)

Spencer T. Bachus, III
(Full Name)

442 Cannon Building
(Mailing Address)

Washington, DC

Daytime Telephone: 202-225-4921

Filer Status: [X] Member of the U.S. House of Representatives — State: Alabama, District: Sixth; [ ] Officer or Employee — Employing Office

Report Type: [X] Annual (May 15); [ ] Amendment; [ ] Termination — Termination Date

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EXEMPTION—Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption? — Yes [ ] No [X]

CERTIFICATION — THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended. The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct or its designee. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil penalties and criminal sanctions (*See* 5 U.S.C. app. 4, §104 and 18 U.S.C. §1001).

SIGNATURE OF REPORTING INDIVIDUAL

DATE (Month/Day/Year): 5-14-98

Name	Spencer T. Bachus, III	Page 1 of 1

SCHEDULE I — EARNED INCOME

List the source, type, and amount of earned income from any source (other than the filer's current employment by the U.S. Government) totalling $200 or more during the preceding calendar year. For a spouse, list the source and amount of any honoraria, list only the source for other spouse earned income exceeding $1,000.

	Source	Type	Amount
Examples	Keene State	Approved Teaching Fee	$6,000
	State of Maryland	Legislative Pension	$9,000
	Civil War Roundtable (Oct. 2nd)	Spouse Speech	$1,000
	Ontario County Board of Education	Spouse Salary	NA
	U. S. House of Representatives	Salary	$126,920
	Cancer Research Foundation	Spousal Salary	$ 10,000

For payments to charity in lieu of honoraria, use Schedule II.

Name	Spencer T. Bachus, III	Page 1 of 1

SCHEDULE II — PAYMENTS IN LIEU OF HONORARIA MADE TO CHARITY

List the source, activity (i.e., speech, appearance, or article), date, and amount of any payment made by the sponsor of an event to a charitable organization in lieu of an honorarium. A separate confidential list of charities receiving such payments must be filed directly with the Committee on Standards of Official Conduct. An envelope for transmitting the list is included in each Member's filing package.

Source	Activity	Date	Amount
Examples: Association of American Associations, Wash., D.C.	Speech	Feb. 2, 1997	$2,000
XYZ Magazine	Article	Aug. 13, 1997	$500
N/A			

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Name Spencer T. Bachus, III | Page 1 of 3

SCHEDULE III — ASSETS AND "UNEARNED" INCOME

BLOCK A — Asset and/or Income Source

Identify (a) each asset held for investment or production of income with a fair market value exceeding $1,000 at the end of the reporting year, and (b) any other asset or source of income which generated more than $200 in "unearned" income during the year. For rental property or land, provide an address. Provide full names of any mutual funds. For an IRA or retirement plan that is *self-directed*, list the underlying assets worth more than $1,000. For an IRA or retirement plan that is not selfdirected, name the institution holding the account.

Exclude: Your personal residence(s) (unless there is rental income), any debt owed to you by your spouse, or by your or your spouse's child, parent, or sibling, any deposits totalling $5,000 or less in personal savings accounts; any financial interests in or income derived from U.S. Government retirement programs.

If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC) or is jointly held (JT), in the optional column on the far left

BLOCK B — Value of Asset

at close of reporting year
If you use a valuation method other than fair market value, please specify the method used
If an asset was sold and is included only because it generated income, the value should be "None."

BLOCK C — Type of Income

BLOCK D — Amount of Income

For IRA's and retirement plans that are *not* self-directed, you may write in "NA" for income

BLOCK E — Transaction

Indicate if asset was purchased (P), sold (S), or exchanged (E) in reporting year

	BLOCK A	BLOCK B												BLOCK C							BLOCK D										BLOCK E
		A None	B $1 – $1,000	C $1,001 – $15,000		E $15,001 – $50,000	F $50,001 – $100,000	G $100,001 – $250,000	H $250,001 – $500,000	I $500,001 – $1,000,000	J $1,000,001 – $5,000,000	K $5,000,001 – $25,000,000	L $25,000,001 – $50,000,000	Over $50,000,000	DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Type of Income (Specify. For Example: Partnership Income or Farm Income)	I None	II $1 – $200	III $201 – $1,000	IV $1,001 – $2,500	V $2,501 – $5,000	VI $5,001 – $15,000	VII $15,001 – $50,000	VIII $50,001 – $100,000	IX $100,001 – $1,000,000	X $1,000,001 – $5,000,000	XI Over $5,000,000	
SP	"	SP	Mega Corp. Stock				X																								P
DC	*Examples*		Simon & Schuster		Indefinite																Royalties										S
JT			1st Bank of Paducah, KY accounts				X									X										X					E
	J. C. Bradford Co., Mobile		X													X						X									
	Regions Bank, Bham		X													X						X									
	4812 12th Ave N, Bham				X										X										X						
	Druid Hills Dr., Bham			X											X										X						
	3437 28th Pl No., Bham			X											X										X						
	1213 Impala Dr., Bham				X										X										X						

For additional assets and unearned income, use next page.

SCHEDULE III — ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Name: Spencer T. Bachus, III

SP, DC, JT	BLOCK A Asset and/or Income Source	BLOCK B Year-End Value of Asset												BLOCK C Type of Income							BLOCK D Amount of Income										BLOCK E Transaction
		A None	B $1 - $1,000	C $1,001 - $15,000	D $15,001 - $50,000	E $50,001 - $100,000	F $100,001 - $250,000	G $250,001 - $500,000	H $500,001 - $1,000,000	I $1,000,001 - $5,000,000	J $5,000,001 - $25,000,000	K $25,000,001 - $50,000,000	L Over $50,000,000	DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Type of Income (Specify)	I None	II $1 - $200	III $201 - $1,000	IV $1,001 - $2,500	V $2,501 - $5,000	VI $5,001 - $15,000	VII $15,001 - $50,000	VIII $50,001 - $100,000	IX $100,001 - $1,000,000	X $1,000,001 - $5,000,000	XI Over $5,000,000	P, S, E
	2612 Janice Cir., Bham					X									X										X						
	Civic Ctr Prof Bldg, Bham						X								X											X					
SP	Smith Barney Money Mkt				X											X								X							
SP	Public Storage - Pref					X								X										X							
SP	TCI Communications					X								X										X							
SP	Textron Capital					X								X										X							
AP	Lehman Bros, Bond					X										X								X							
SP	Union Carbide Chemicals					X										X								X							
SP	Heller Financial Inc.					X										X								X							
SP	Bankers Trust NY					X										X								X							
SP	Conesco, Inc. Notes					X										X									X						
SP	Bank America Corp					X										X								X							
SP	Solomon Inc.					X										X									X						
SP	General Motors Notes					X										X								X							
SP	Chase Manhattan Corp					X										X								X							
SP	US Treasury - Strips						X									X									X						
SP	PFL Insurnace Annuity						X									X									X						
SP	Fidelity Growth - IRA					X										X								X							
SP	Fidelity Equity - IRA			X												X								X							
SP	Fidelity Puritan - IRA					X										X								X							
SP	AmSouth Bank, Bham			X												X					X										
SP	Fidelity Cash Reserve				X									X										X							

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SCHEDULE III — ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Name Spence T. Bachus, III | Page 3 of 3

SP. DC. JT	BLOCK A Asset and/or Income Source	BLOCK B Year-End Value of Asset												BLOCK C Type of Income								BLOCK D Amount of Income											BLOCK E Transaction
		A None	B $1 - $1,000	C $1,001 - $15,000	D $15,001 - $50,000	E $50,001 - $100,000	F $100,001 - $250,000	G $250,001 - $500,000	H $500,001 - $1,000,000	I $1,000,001 - $5,000,000	J $5,000,001 - $25,000,000	K $25,000,001 - $50,000,000	L Over $50,000,000	DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Type of Income (Specify)		I None	II $1 - $200	III $201 - $1,000	IV $1,001 - $2,500	V $2,501 - $5,000	VI $5,001 - $15,000	VII $15,001 - $50,000	VIII $50,001 - $100,000	IX $100,001 - $1,000,000	X $1,000,001 - $5,000,000	XI Over $5,000,000	P S E
SP	Southwood Enterp. Ptnrshp						X													*						X						
SP	Commercial Investment Cahaba Hgts Village Rd Birmingham, AL					X														*				X								
														* Partnership Passive Income																		

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SCHEDULE IV — TRANSACTIONS

Name: Spencer T. Bachus, III

SP, DC, JT	Asset	Type of Transaction			Date	Amount of Transaction									
Report any purchase, sale, or exchange by you, your spouse, or dependent child during the reporting year of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child, or the purchase or sale of your personal residence, unless it is rented out		PURCHASE	SALE	EXCHANGE	(MO/DAY/YR)	B $1,001–$15,000	C $15,001–$50,000	D $50,001–$100,000	E $100,001–$250,000	F $250,001–$500,000	G $500,001–$1,000,000	H $1,000,001–$5,000,000	I $5,000,001–$25,000,000	J $25,000,001–$50,000,000	K Over $50,000,000
SP	*Example* Mega Corporation Common Stock	x			10-12-97		x								
	1237 Branchwater Lane, Bham, AL		X		1/31/97				X						
	Put America On Line Oct 065	X			9/03/97	X									
	Put America On Line Oct 065		X		9/11/97	X									
	Put America On Line Nov 070	X			10/06/97	X									
	Put America On Line Nov 070		X		10/28/97	X									
	Put America On Line Nov 080	X			10/29/97	X									
	Put America On Line Nov 080		X		10/31/97	X									
	Call Amgen, Inc. Oct 050	X			9/17/97	X									
	Call Amgen, Inc. Oct 050		X		10/7/97	X									
	Call Amgen, Inc. Dec 050	X			10/31/97	X									
	Call Amgen, Inc. Dec 050		X		11/4/97	X									
	Put Coca Cola Jan 055	X			8/19/97	X									
	Put Coca Cola Jan 055	X			10/8/97	X									
	Put Coca Cola Jan 055		X		10/24/97	X									
	Put Coca Cola Jan 055		X		10/28/97	X									
	Put Coca Cola Jan 055	X			11/12/97	X									

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Name Spencer T. Bachus, III | Page 2 of 8

SCHEDULE IV — TRANSACTIONS

Report any purchase, sale, or exchange by you, your spouse, or dependent child during the reporting year of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child, or the purchase or sale of your personal residence, unless it is rented out.

SP, DC, JT	Asset	Type of Transaction: PURCHASE	SALE	EXCHANGE	Date (MO/DAY/YR)	Amount of Transaction: B ($1,001–$15,000)	C ($15,001–$50,000)	D ($50,001–$100,000)	E ($100,001–$250,000)	F ($250,001–$500,000)	G ($500,001–$1,000,000)	H ($1,000,001–$5,000,000)	I ($5,000,001–$25,000,000)	J ($25,000,001–$50,000,000)	K (Over $50,000,000)
SP	*Example:* Mega Corporation Common Stock	X			10-12-97		X								
	Put Coca Cola Jan 055		X		11/17/97	X									
	Put Coca Cola Jan 060	X			11/19/97	X									
	Put Coca Cola Feb 055	X			1/8/97	X									
	Put Coca Cola Feb 065	X			12/15/97	X									
	Put Coca Cola Feb 065		X		12/19/97	X									
	Put Coca Cola Feb 060	X			11/4/97	X									
	Put Coca Cola Mar 060	X			3/7/97	X									
	Put Coca Cola Mar 060		X		3/20/97	X									
	Put Coca Cola May 050	X			1/31/97	X									
	Put Coca Cola May 060	X			2/4/97	X									
	Put Coca Cola May 060		X		3/27/97	X									
	Put Coca Cola Jun 055	X			4/25/97	X									
	Put Coca Cola Jun 060	X			4/28/97	X									
	Put Coca Cola Jul 065	X			6/4/97	X									
	Put Coca Cola Jul 065	X			6/13/97	X									
	Put Coca Cola Aug 070	X			6/16/97	X									

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Name Spencer T. Bachus, III | Page 3 of 8

SCHEDULE IV — TRANSACTIONS

Report any purchase, sale, or exchange by you, your spouse, or dependent child during the reporting year of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child, or the purchase or sale of your personal residence, unless it is rented out.

SP, DC, JT	Asset	Type of Transaction			Date	Amount of Transaction									
		PURCHASE	SALE	EXCHANGE	(MO/DAY/YR)	B $1,001–$15,000	C $15,001–$50,000	D $50,001–$100,000	E $100,001–$250,000	F $250,001–$500,000	G $500,001–$1,000,000	H $1,000,001–$5,000,000	I $5,000,001–$25,000,000	J $25,000,001–$50,000,000	K Over $50,000,000
SP	*Example:* Mega Corporation Common Stock	X			10-12-97		X								
	Put Coca Cola Aug 070		X		8/7/97	X									
	Put Coca Cola Oct 060	X			9/2/97	X									
	Put Coca Cola Oct 060		X		9/12/97	X									
	Put Coca Cola Oct 060	X			9/25/97	X									
	Put Coca Cola Oct 060		X		10/17/97	X									
	Put Coca Cola Nov 060	X			8/1/97	X									
	Put Coca Cola Nov 060		X		8/15/97	X									
	Put Coca Cola Nov 060		X		8/27/97	X									
	Put Coca Cola Nov 060		X		10/17/97	X									
	Put Coca Cola Nov 060	X			10/29/97	X									
	Put Coca Cola Nov 060		X		10/30/97	X									
	Put Coca Cola Nov 060		X		10/31/97	X									
	Put Coca Cola Dec 060	X			10/30/97	X									
	Put Coca Cola Dec 060		X		11/17/97	X									
	Call Dell Computer Nov 080	X			10/31/97	X									
	Call Dell Computer Nov 080		X		11/17/97	X									

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SCHEDULE IV — TRANSACTIONS

Name: Spencer T. Bachus, III | Page 4 of 8

Report any purchase, sale, or exchange by you, your spouse, or dependent child during the reporting year of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child, or the purchase or sale of your personal residence, unless it is rented out.

SP, DC, JT	Asset	Type of Transaction: PURCHASE	SALE	EXCHANGE	Date (MO/DAY/YR)	Amount of Transaction: B ($1,001–$15,000)	C ($15,001–$50,000)	D ($50,001–$100,000)	E ($100,001–$250,000)	F ($250,001–$500,000)	G ($500,001–$1,000,000)	H ($1,000,001–$5,000,000)	I ($5,000,001–$25,000,000)	J ($25,000,001–$50,000,000)	K (Over $50,000,000)
SP	*Example* Mega Corporation Common Stock	X			10-12-97		X								
	Put Walt Disney Jan 095	X			12/16/97	X									
	Put Walt Disney Jan 090	X			11/19/97	X									
	Put Walt Disney Jan 090	X			12/17/97	X									
	Put Walt Disney Oct 085	X			5/20/97	X									
	Put Walt Disney Oct 085		X		7/2/97	X									
	Put Walt Disney Oct 080	X			8/19/97	X									
	Put Walt Disney Oct 080		X		9/16/97	X									
	Put Gillette Co. Jan 090	X			11/4/97	X									
	Put Gillette Jan 090		X		11/17/97	X									
	Put Gillette Sep 095	X			8/1/97	X									
	Put Gillette Sep 095		X		8/13/97	X									
	Put Gillette Dec 080	X			8/19/97	X									
	Put Gillette Dec 080		X		9/5/97	X									
	Put IBM Nov 100	X			10/29/97	X									
	Put IBM Nov 100		X		10/30/97	X									

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SCHEDULE IV — TRANSACTIONS

Name: Spencer T. Bachus, III | Page 5 of 8

Report any purchase, sale, or exchange by you, your spouse, or dependent child during the reporting year of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child, or the purchase or sale of your personal residence, unless it is rented out.

SP, DC, JT	Asset	Type of Transaction: PURCHASE	SALE	EXCHANGE	Date (MO/DAY/YR)	Amount of Transaction: B ($1,001–$15,000)	C ($15,001–$50,000)	D ($50,001–$100,000)	E ($100,001–$250,000)	F ($250,001–$500,000)	G ($500,001–$1,000,000)	H ($1,000,001–$5,000,000)	I ($5,000,001–$25,000,000)	J ($25,000,001–$50,000,000)	K (Over $50,000,000)
SP	*Example* Mega Corporation Common Stock	X			10-12-97		X								
	Put Microsoft Jan 135 PSL	X			12/5/97	X									
	Put Microsoft Jan 135 PSL		X		12/15/97	X									
	Put Microsoft Oct 130 PSL	X			8/20/97	X									
	Put Microsoft Oct 130 PSL		X		8/28/97	X									
	Put Microsoft Nov 135 PSL	X			10/3/97	X									
	Put Microsoft Nov 135 PSL		X		10/28/97	X									
	Put Micron Tech Sept 055	X			8/7/97	X									
	Put Micron Tech Sept 055		X		8/13/97		X								
	Put Semi Conduct May 270 PBW	X			4/7/97	X									
	Put Semi Conduct May 270 PBW		X		4/11/97	X									
	Put Pepsico, Inc. May 325 CBOL	X			3/27/97	X									
	Put Pepsico May 325 CBOL	X			4/11/97	X									
	Put Pepsico May 325 CBOL		X		4/28/97	X									
	Put Pepsico Jul 325 CBOL	X			4/29/97	X									
	Put Pepsico Jul 325 CBOL	X			5/1/97	X									
	Put Pepsico Jul 035 CBOL	X			5/2/97	X									

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SCHEDULE IV — TRANSACTIONS

Name: Spencer T. Bachus, III | Page 6 of 8

Report any purchase, sale, or exchange by you, your spouse, or dependent child during the reporting year of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child, or the purchase or sale of your personal residence, unless it is rented out

SP, DC, JT	Asset	Type of Transaction			Date	Amount of Transaction									
		PURCHASE	SALE	EXCHANGE	(MO/DAY/YR)	B $1,001–$15,000	C $15,001–$50,000	D $50,001–$100,000	E $100,001–$250,000	F $250,001–$500,000	G $500,001–$1,000,000	H $1,000,001–$5,000,000	I $5,000,001–$25,000,000	J $25,000,001–$50,000,000	K Over $50,000,000
SP	*Example* Mega Corporation Common Stock	X			10-12-97		X								
	Put Pepsico Aug 035	X			7/22/97	X									
	Put Pepsico Oct 37.5	X			8/1/97	X									
	Put Pepsico Oct 37.5	X			8/13/97	X									
	Put Pepsico Oct 37.5		X		8/15/97	X									
	Put Pepsico Oct 37.5		X		8/19/97	X									
	Put Presstek, Inc. May 055	X			4/7/97	X									
	Put Presstek May 055	X			4/15/97	X									
	Put Presstek Oct 47.5	X			9/5/97	X									
	Put Presstek Oct 47.5		X		9/30/97	X									
	Put Proctor Gamble Jan 070	X			11/4/97	X									
	Put Proctor Gamble Jan 070	X			11/12/97	X									
	Put Proctor Gamble Jan 080	X			12/16/97	X									
	Put Proctor Gamble Jul 150	X			7/9/97	X									
	Put Proctor Gamble Aug 145	X			7/7/97	X									
	Put Proctor Gamble Aug 145		X		8/8/97	X									

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SCHEDULE IV — TRANSACTIONS

Name Spencer T. Bachus, III | Page 7 of 8

Report any purchase, sale, or exchange by you, your spouse, or dependent child during the reporting year of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child, or the purchase or sale of your personal residence, unless it is rented out.

SP, DC, JT	Asset	Type of Transaction: PURCHASE	SALE	EXCHANGE	Date (MO/DAY/YR)	Amount of Transaction: B ($1,001–$15,000)	C ($15,001–$50,000)	D ($50,001–$100,000)	E ($100,001–$250,000)	F ($250,001–$500,000)	G ($500,001–$1,000,000)	H ($1,000,001–$5,000,000)	I ($5,000,001–$25,000,000)	J ($25,000,001–$50,000,000)	K (Over $50,000,000)
SP	*Example:* Mega Corporation Common Stock	X			10-12-97		X								
	Put Proctor Gamble Aug 155	X			8/1/97	X									
	Put Proctor Gamble Aug 155		X		8/5/97	X									
	Put Proctor Gamble Oct 150	X			7/29/97	X									
	Put Proctor Gamble Oct 150		X		8/8/97	X									
	Put Proctor Gamble Oct 130	X			5/20/97	X									
	Put Proctor Gamble Oct 130	X			9/12/97	X									
	Put Proctor Gamble Oct 130	X			9/16/97	X									
	Put Proctor Gamble Nov 065	X			10/17/97	X									
	Put Proctor Gamble Nov 065		X		10/28/97	X									
	Call Sun Micro Oct 050	X			8/15/97	X									
	Call Sun Micro Oct 050		X		8/19/97	X									
	Put UAL Corp Jan 085	X			12/16/97	X									
	Put UAL Jan 085		X		12/17/97	X									
	Put UAL Jan 080	X			12/11/97	X									
	Put UAL Feb 090	X			11/4/97	X									
	Put UAL Feb 090		X		11/12/97	X									

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Name Spencer T. Bachus, III | Page 8 of 8

SCHEDULE IV — TRANSACTIONS

Report any purchase, sale, or exchange by you, your spouse, or dependent child during the reporting year of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child, or the purchase or sale of your personal residence, unless it is rented out.

SP, DC, JT	Asset	Type of Transaction			Date	Amount of Transaction									
		PURCHASE	SALE	EXCHANGE	(MO/DAY/YR)	B $1,001–$15,000	C $15,001–$50,000	D $50,001–$100,000	E $100,001–$250,000	F $250,001–$500,000	G $500,001–$1,000,000	H $1,000,001–$5,000,000	I $5,000,001–$25,000,000	J $25,000,001–$50,000,000	K Over $50,000,000
SP	*Example.* Mega Corporation Common Stock	X			10–12–97		X								
	Put UAL Corp Feb 090	X			11/12/97	X									
	Put UAL Feb 090		X		11/17/97		X								
	Put UAL Dec 085	X			11/12/97	X									
	Put UAL Dec 085		X		11/17/97	X									
	Put UAL Dec 085	X			11/20/97	X									
	Put UAL Dec 085	X			11/21/97	X									

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Name	Spencer T. Bachus, III	Page 1 of 1

SCHEDULE V — LIABILITIES

Report liabilities of over $10,000 owed to any one creditor ***at any time*** during the reporting period by you, your spouse, or dependent child. Mark the highest amount owed during the year. **Exclude:** Any mortgage on your personal residence (unless it is rented out), loans secured by automobiles, household furniture, or appliances, and liabilities owed to a spouse, or the child, parent, or sibling of you or your spouse. Report ***revolving charge accounts*** only if the balance at the end of the reporting period exceeded $10,000.

SP, DC, JT	Creditor	Type of Liability	Amount of Liability B ($10,001–$15,000)	C ($15,001–$50,000)	D ($50,001–$100,000)	E ($100,001–$250,000)	F ($250,001–$500,000)	G ($500,001–$1,000,000)	H ($1,000,001–$5,000,000)	I ($5,000,001–$25,000,000)	J ($25,000,001–$50,000,000)	K (Over $50,000,000)
Example	First Bank of Wilmington, Delaware	Mortgage on 123 Main St., Dover, Del				X						
	Regions Bank, Birmingham, AL	Mortgage, Civic Center Prof Bldg., Bham			X							
	Compass Bank, Birmingham, AL	Mortgage Rental Properties				X						

SCHEDULE VI — GIFTS

Report the source, a brief description, and the value of all gifts totalling more than $250 received by you, your spouse, or a dependent child from any source during the year.

Exclude: Gifts from relatives, gifts of personal hospitality of an individual, local meals, and gifts to a spouse or dependent child that are totally independent of his or her relationship to you. Gifts with a value of $100 or less need not be added towards the $250 disclosure threshold.

Note: The gift rule (House Rule 51) prohibits gifts except as specifically provided in the rule.

Source	Description	Value
Example Mr. Joseph H. Smith, Anytown, Anystate	Silver Platter (determination on personal friendship received from Committee on Standards)	$270
	N/A	

Use additional sheets if more space is required.

Name	Spencer T. Bachus, III	Page 1 of 1

SCHEDULE VII —TRAVEL PAYMENTS AND REIMBURSEMENTS

Identify the source and list travel itinerary, dates, and nature of expenses provided for travel and travel-related expenses totalling more than $250 received by you, your spouse, or a dependent child during the reporting period. Indicate whether a family member accompanied the traveler at the sponsor's expense, and the amount of time, if any, that was not at the sponsor's expense. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor.

Exclude: Travel-related expenses provided by federal, state, and local governments, or by a foreign government required to be separately reported under the Foreign Gifts and Decorations Act (5 U.S.C. § 7342); travel paid for by a Federal political committee; travel provided to a spouse or dependent child that is totally independent of his or her relationship to you.

Source	Date(s)	Point of Departure—Destination—Point of Return	Lodging? (Y/N)	Food? (Y/N)	Was a Family Member Included? (Y/N)	Any time not at sponsor's expense
Examples: Chicago Chamber of Commerce	Mar. 2	Wash., D.C.—Chicago—Wash., D.C.	N	N	N	N
Examples: Roycroft Corporation	Aug. 6–13	Wash., D.C.—Los Angeles—Cleveland	Y	Y	Y	4 Days
National Railroad Construction & Maintenance Assoc.	Jan 10-14	Wash, DC - Scottsdale, AZ - Birmingham, AL	Y	Y	Y	N
Aspen Institute	Mar 7-9	Wash, DC - Hershey, PA - Wash, DC	Y	Y	Y	N
Assoc. of American Railroads	Apr 4-7	Bham, AL - Palm Beach, FL - Wash, DC	Y	Y	Y	N
Eastern General Manager's Association	Jul 11-13	Wash, DC - Cooperstown, NY - Wash, DC	Y	Y	Y	N
Burlington Northern Santa Fe	Sep 19-21	Wash, DC - Seattle/Spokane - Wash, DC	Y	Y	Y	N
Railway Tie Association	Oct 9-10	Wash, DC - Nashville, TN - Bham, AL	Y	Y	Y	N

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SCHEDULE VIII — POSITIONS

Report all positions, compensated or uncompensated, held during the current calendar year as an officer, director, trustee of an organization, partner, proprietor, representative, employee, or consultant of any corporation, firm, partnership, or other business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States.

Exclude: Positions held in any religious, social, fraternal, or political entities; positions solely of an honorary nature; and positions listed on Schedule I.

Position	Name of Organization
	N/A

SCHEDULE IX — AGREEMENTS

Identify the date, parties to, and general terms of any agreement or arrangement with respect to: future employment; a leave of absence during the period of government service; continuation or deferral of payments by a former or current employer other than the U.S. Government, or continuing participation in an employee welfare or benefit plan maintained by a former employer.

Date	Parties To	Terms of Agreement
	N/A	

Use additional sheets if more space is required.

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1997

FORM A
For use by Members, officers, and employees

RECEIVED
98 JUN 10 PM 4:00
OFFICE OF THE CLERK
U.S. HOUSE OF REPRESENTATIVES

MC HAND DELIVERED
(Office Use Only)

19

Spencer T. Bachus, III
(Full Name)

442 Cannon Building
(Mailing Address)

Washington, DC

Daytime Telephone
202-225-4921

Filer Status	[X] Member of the U.S. House of Representatives	State Alabama District Sixth	[ ] Officer or Employee	Employing Office	**A *$200 penalty* shall be assessed against anyone who files more than 30 days late.**
Report Type	[ ] Annual (May 15)	[X] Amendment	[ ] Termination	Termination Date:	

PRELIMINARY INFORMATION — ANSWER EACH OF THESE QUESTIONS

I Did you or your spouse have "earned" income (e.g., salaries or fees) of $200 or more from any source in the reporting period? **If yes, complete and attach Schedule I.**	Yes [X]	No [ ]	VI Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $250 and not otherwise exempt)? **If yes, complete and attach Schedule VI.**	Yes [ ]	No [X]
II Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? **If yes, complete and attach Schedule II.**	Yes [ ]	No [X]	VII Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $250 from one source)? **If yes, complete and attach Schedule VII.**	Yes [X]	No [ ]
III Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? **If yes, complete and attach Schedule III.**	Yes [X]	No [ ]	VIII Did you hold any reportable positions on or before the date of filing in the current calendar year? **If yes, complete and attach Schedule VIII.**	Yes [ ]	No [X]
IV Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset worth more than $1,000 in the reporting period? **If yes, complete and attach Schedule IV.**	Yes [X]	No [ ]	IX Did you have any reportable agreement or arrangement with an outside entity? **If yes, complete and attach Schedule IX.**	Yes [ ]	No [X]
V Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? **If yes, complete and attach Schedule V.**	Yes [X]	No [ ]	**Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.**		

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION — ANSWER EACH OF THESE QUESTIONS

TRUSTS—Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child?	Yes [ ]	No [X]
EXEMPTION—Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption?	Yes [ ]	No [X]

CERTIFICATION — THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended. The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct or its designee. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil penalties and criminal sanctions (*See* 5 U.S.C. app. 4, §104 and 18 U.S.C. §1001).

SIGNATURE OF REPORTING INDIVIDUAL

DATE (Month/Day/Year)
6/10/98

Name	Spencer T. Bachus,III	Page 1 of 1

SCHEDULE I — EARNED INCOME

List the source, type, and amount of earned income from any source (other than the filer's current employment by the U S Government) totalling $200 or more during the preceding calendar year. For a spouse, list the source and amount of any honoraria; list only the source for other spouse earned income exceeding $1,000.

Source	Type	Amount
Examples: Keene State	Approved Teaching Fee	$6,000
State of Maryland	Legislative Pension	$9,000
Civil War Roundtable (Oct 2nd)	Spouse Speech	$1,000
Ontario County Board of Education	Spouse Salary	NA
U. S. House of Representatives	Salary	$126,920
Cancer Research Foundation	Spousal Salary	$ 10,000

For payments to charity in lieu of honoraria, use Schedule II.

Name	Spencer T. Bachus, III	Page	1 of 1

SCHEDULE II — PAYMENTS IN LIEU OF HONORARIA MADE TO CHARITY

List the source, activity (i.e., speech, appearance, or article), date, and amount of any payment made by the sponsor of an event to a charitable organization in lieu of an honorarium. A separate confidential list of charities receiving such payments must be filed directly with the Committee on Standards of Official Conduct. An envelope for transmitting the list is included in each Member's filing package.

Source	Activity	Date	Amount
Examples Association of American Associations, Wash., D.C. XYZ Magazine	Speech Article	Feb. 2, 1997 Aug. 13, 1997	$2,000 $500
N/A			

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SCHEDULE III — ASSETS AND "UNEARNED" INCOME

BLOCK A — Asset and/or Income Source

Identify (a) each asset held for investment or production of income with a fair market value exceeding $1,000 at the end of the reporting year, and (b) any other asset or source of income which generated more than $200 in "unearned" income during the year. For rental property or land, provide an address. Provide full names of any mutual funds. For an IRA or retirement plan that is *self-directed*, list the underlying assets worth more than $1,000. For an IRA or retirement plan that is not selfdirected, name the institution holding the account.

Exclude: Your personal residence(s) (unless there is rental income), any debt owed to you by your spouse, or by your or your spouse's child, parent, or sibling, any deposits totalling $5,000 or less in personal savings accounts, any financial interests in or income derived from U.S. Government retirement programs

If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC) or is jointly held (JT), in the optional column on the far left

SP, DC, JT	*Examples*	SP	Mega Corp. Stock Simon & Schuster 1st Bank of Paducah, KY accounts

BLOCK B — Value of Asset

at close of reporting year.
If you use a valuation method other than fair market value, please specify the method used. If an asset was sold and is included only because it generated income, the value should be "None."

	A	B	C	E	F	G	H	I	J	K	L
	None	$1 – $1,000	$1,001 – $15,000	$15,001 – $50,000	$50,001 – $100,000	$100,001 – $250,000	$250,001 – $500,000	$500,001 – $1,000,000	$1,000,001 – $5,000,000	$5,000,001 – $25,000,000	$25,000,001 – $50,000,000	Over $50,000,000
Mega Corp. Stock					X							
Simon & Schuster		Indefinite				X						
1st Bank of Paducah, KY accounts												
J. C. Bradford Co., Mobile		X										
Regions Bank, Bham		X										
4812 12th Ave N, Bham				X								
Druid Hills Dr., Bham			X									
3437 28th Pl No., Bham			X									
1213 Impala Dr., Bham				X								

BLOCK C — Type of Income

	DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Type of Income (Specify. For Example: Partnership Income or Farm Income)
Mega Corp. Stock	X						
Simon & Schuster			X				Royalties
1st Bank of Paducah, KY accounts							
J. C. Bradford Co., Mobile			X				
Regions Bank, Bham			X				
4812 12th Ave N, Bham		X					
Druid Hills Dr., Bham		X					
3437 28th Pl No., Bham		X					
1213 Impala Dr., Bham		X					

BLOCK D — Amount of Income

For IRA's and retirement plans that are *not* self-directed, you may write in "NA" for income.

	I	II	III	IV	V	VI	VII	VIII	IX	X	XI
	None	$1 – $200	$201 – $1,000	$1,001 – $2,500	$2,501 – $5,000	$5,001 – $15,000	$15,001 – $50,000	$50,001 – $100,000	$100,001 – $1,000,000	$1,000,001 – $5,000,000	Over $5,000,000
Mega Corp. Stock											
Simon & Schuster					X						
1st Bank of Paducah, KY accounts						X			X		
J. C. Bradford Co., Mobile		X									
Regions Bank, Bham		X									
4812 12th Ave N, Bham					X						
Druid Hills Dr., Bham					X						
3437 28th Pl No., Bham					X						
1213 Impala Dr., Bham					X						

BLOCK E — Transaction

Indicate if asset was purchased (P), sold (S), or exchanged (E) in reporting year

Mega Corp. Stock
Simon & Schuster
1st Bank of Paducah, KY accounts
J. C. Bradford Co., Mobile
Regions Bank, Bham
4812 12th Ave N, Bham
Druid Hills Dr., Bham
3437 28th Pl No., Bham
1213 Impala Dr., Bham

P
S
E
P

For additional assets and unearned income, use next page.

SCHEDULE III — ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Name: Spencer T. Bachus, III

SP. DC. JT	BLOCK A Asset and/or Income Source	BLOCK B Year-End Value of Asset												BLOCK C Type of Income							BLOCK D Amount of Income										BLOCK E Transaction
		A None	B $1 - $1,000	C $1,001 - $15,000	D $15,001 - $50,000	E $50,001 - $100,000	F $100,001 - $250,000	G $250,001 - $500,000	H $500,001 - $1,000,000	I $1,000,001 - $5,000,000	J $5,000,001 - $25,000,000	K $25,000,001 - $50,000,000	L Over $50,000,000	DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Type of Income (Specify)	I None	II $1 - $200	III $201 - $1,000	IV $1,001 - $2,500	V $2,501 - $5,000	VI $5,001 - $15,000	VII $15,001 - $50,000	VIII $50,001 - $100,000	IX $100,001 - $1,000,000	X $1,000,001 - $5,000,000	XI Over $5,000,000	P, S, E
	2612 Janice Cir., Bham					X									X										X						
	Civic Ctr Prof Bldg, Bham						X								X											X						
SP	Smith Barney Money Mkt				X											X								X							
SP	Public Storage - Pref					X								X											X						
SP	TCI Communications					X								X											X						
SP	Textron Capital					X								X											X						
AP	Lehman Bros, Bond					X										X									X						
SP	Union Carbide Chemicals					X										X									X						
SP	Heller Financial Inc.					X										X									X						
SP	Bankers Trust NY					X										X									X						
SP	Conesco,Inc. Notes					X										X										X					
SP	Bank America Corp					X										X									X						
SP	Solomon Inc.					X										X										X					
SP	General Motors Notes					X										X									X						
SP	Chase Manhattan Corp					X										X									X						
SP	US Treasury - Strips						X									X										X					
SP	PFL Insurnace Annuity						X									X										X					
SP	Fidelity Growth - IRA					X										X									X						
SP	Fidelity Equity - IRA			X												X								X							
SP	Fidelity Puritan - IRA					X										X									X						
SP	AmSouth Bank, Bham			X												X						X									
SP	Fidelity Cash Reserve				X									X										X							

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SCHEDULE III — ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Name: Spence T. Bachus, III

SP, DC, JT	BLOCK A: Asset and/or Income Source	BLOCK B: Year-End Value of Asset											BLOCK C: Type of Income							BLOCK D: Amount of Income										BLOCK E: Transaction
		A None	B $1 - $1,000	C $1,001 - $15,000	D $15,001 - $50,000	E $50,001 - $100,000	F $100,001 - $250,000	G $250,001 - $500,000	H $500,001 - $1,000,000	I $1,000,001 - $5,000,000	J $5,000,001 - $25,000,000	K $25,000,001 - $50,000,000	L Over $50,000,000	DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Type of Income (Specify)	I None	II $1 - $200	III $201 - $1,000	IV $1,001 - $2,500	V $2,501 - $5,000	VI $5,001 - $15,000	VII $15,001 - $50,000	VIII $50,001 - $100,000	IX $100,001 - $1,000,000	X $1,000,001 - $5,000,000	XI Over $5,000,000	P, S, E
SP	Southwood Enterp. Ptnrshp						X													*					X					
SP	Commercial Investment Cahaba Hgts Village Rd Birmingham, AL					X														*			X							
													*	Partnership Passive Income																

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SCHEDULE III — ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Name: Spencer T. Bachus, III — Page 4 of 5

SP, DC, JT	BLOCK A: Asset and/or Income Source	BLOCK B: Year-End Value of Asset												BLOCK C: Type of Income							BLOCK D: Amount of Income											BLOCK E: Transaction
		A None	B $1 – $1,000	C $1,001 – $15,000	D $15,001 – $50,000	E $50,001 – $100,000	F $100,001 – $250,000	G $250,001 – $500,000	H $500,001 – $1,000,000	I $1,000,001 – $5,000,000	J $5,000,001 – $25,000,000	K $25,000,001 – $50,000,000	L Over $50,000,000	DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Type of Income (Specify)	I None	II $1 – $200	III $201 – $1,000	IV $1,001 – $2,500	V $2,501 – $5,000	VI $5,001 – $15,000	VII $15,001 – $50,000	VIII $50,001 – $100,000	IX $100,001 – $1,000,000	X $1,000,001 – $5,000,000	XI Over $5,000,000	P, S, E
	Put Am On Line Nov 070	X															X						X								S
	Call Amgen Dec 050	X															X							X								S
	Put Coca Cola Jan 055	X															X					X										S
	Put Coca Cola Feb 065	X															X						X									S
	Put Coca Cola May 060	X															X					X										S
	Put Coca Cola Aug 070	X															X					X										S
	Put Coca Cola Oct 060	X															X							X								S
	Put Coca Cola Nov 060	X															X								X							S
	Call Dell Nov 080	X															X					X										S
	Put Disney Oct 085	X															X						X									S
	Put Gillette Sep 095	X															X							X								S
	Put Gillette Dec 080	X															X						X									S
	Put IBM Nov 100	X															X						X									S
	Put Microsoft Jan 135	X															X								X							S
	Put Microsoft Oct 130	X															X							X								S
	Put Micron Sep 055	X															X									X						S
	Put Semi Cond. May 270	X															X							X								S
	Put Pepsico May 325	X															X						X									S
	Put Pepsico Oct 375	X															X							X								S
	Put Presstek Oct 475	X															X							X								S
	Put PRoctor/Gam Aug 145	X															X						X									S
	Put Proctor/Gam Oct 130	X															X						X									S

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SCHEDULE III — ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Name: Spencer T. Bachus, III

SP. DC. JT	BLOCK A Asset and/or Income Source	BLOCK B Year-End Value of Asset											BLOCK C Type of Income							BLOCK D Amount of Income										BLOCK E Transaction
		A None	B $1 – $1,000	C $1,001 – $15,000	D $15,001 – $50,000	E $50,001 – $100,000	F $100,001 – $250,000	G $250,001 – $500,000	H $500,001 – $1,000,000	I $1,000,001 – $5,000,000	J $5,000,001 – $25,000,000	K $25,000,001 – $50,000,000	L Over $50,000,000	DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Type of Income (Specify)	I None	II $1 – $200	III $201 – $1,000	IV $1,001 – $2,500	V $2,501 – $5,000	VI $5,001 – $15,000	VII $15,001 – $50,000	VIII $50,001 – $100,000	IX $100,001 – $1,000,000	X $1,000,001 – $5,000,000	XI Over $5,000,000	P, S, E
	Put Sun Micro Oct 050	X														X				X				X					S
	Put UAL Corp Feb 090	X														X						X								S
	Put UAL FEb 090	X														X						X								S
	Put Coca Cola Jan 060			X												X				X										P
	Put Coca Cola Feb 060			X												X				X										P
	Put Disney Jan 095			X												X				X										P
	Put Proctor/Gam Jan 070			X												X				X										P
	Put Proctor/Gam Jan 070			X												X				X										P
	Put Proctor/Gam Jan 080			X												X				X										P

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SCHEDULE IV — TRANSACTIONS

Name: Spencer T. Bachus, III | Page / of 8

Report any purchase, sale, or exchange by you, your spouse, or dependent child during the reporting year of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child, or the purchase or sale of your personal residence, unless it is rented out.

SP, DC, JT	Asset	Type of Transaction: PURCHASE	SALE	EXCHANGE	Date (MO/DAY/YR)	Amount of Transaction: B ($1,001 – $15,000)	C ($15,001 – $50,000)	D ($50,001 – $100,000)	E ($100,001 – $250,000)	F ($250,001 – $500,000)	G ($500,001 – $1,000,000)	H ($1,000,001 – $5,000,000)	I ($5,000,001 – $25,000,000)	J ($25,000,001 – $50,000,000)	K (Over $50,000,000)
SP	*Example:* Mega Corporation Common Stock	X			10-12-97		X								
	1237 Branchwater Lane, Bham, AL		X		1/31/97				X						
	Put America On Line Oct 065	X			9/03/97	X									
	Put America On Line Oct 065		X		9/11/97	X									
	Put America On Line Nov 070	X			10/06/97	X									
	Put America On Line Nov 070		X		10/28/97	X									
	Put America On Line Nov 080	X			10/29/97	X									
	Put America On Line Nov 080		X		10/31/97	X									
	Call Amgen, Inc. Oct 050	X			9/17/97	X									
	Call Amgen, Inc. Oct 050		X		10/7/97	X									
	Call Amgen, Inc. Dec 050	X			10/31/97	X									
	Call Amgen, Inc. Dec 050		X		11/4/97	X									
	Put Coca Cola Jan 055	X			8/19/97	X									
	Put Coca Cola Jan 055	X			10/8/97	X									
	Put Coca Cola Jan 055		X		10/24/97	X									
	Put Coca Cola Jan 055		X		10/28/97	X									
	Put Coca Cola Jan 055	X			11/12/97	X									

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SCHEDULE IV — TRANSACTIONS

Name: Spencer T. Bachus, III | Page 2 of 8

Report any purchase, sale, or exchange by you, your spouse, or dependent child during the reporting year of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child, or the purchase or sale of your personal residence, unless it is rented out.

SP, DC, JT	Asset	Type of Transaction			Date	Amount of Transaction									
		PURCHASE	SALE	EXCHANGE	(MO/DAY/YR)	B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H $1,000,001 - $5,000,000	I $5,000,001 - $25,000,000	J $25,000,001 - $50,000,000	K Over $50,000,000
SP	*Example:* Mega Corporation Common Stock	X			10-12-97		X								
	Put Coca Cola Jan 055		X		11/17/97	X									
	Put Coca Cola Jan 060	X			11/19/97	X									
	Put Coca Cola Feb 055	X			1/8/97	X									
	Put Coca Cola Feb 065	X			12/15/97	X									
	Put Coca Cola Feb 065		X		12/19/97	X									
	Put Coca Cola Feb 060	X			11/4/97	X									
	Put Coca Cola Mar 060	X			3/7/97	X									
	Put Coca Cola Mar 060		X		3/20/97	X									
	Put Coca Cola May 050	X			1/31/97	X									
	Put Coca Cola May 060	X			2/4/97	X									
	Put Coca Cola May 060		X		3/27/97	X									
	Put Coca Cola Jun 055	X			4/25/97	X									
	Put Coca Cola Jun 060	X			4/28/97	X									
	Put Coca Cola Jul 065	X			6/4/97	X									
	Put Coca Cola Jul 065	X			6/13/97	X									
	Put Coca Cola Aug 070	X			6/16/97	X									

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SCHEDULE IV — TRANSACTIONS

Name Spencer T. Bachus, III | Page 3 of 8

Report any purchase, sale, or exchange by you, your spouse, or dependent child during the reporting year of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child, or the purchase or sale of your personal residence, unless it is rented out.

SP, DC, JT	Asset	Type of Transaction			Date	Amount of Transaction									
		PURCHASE	SALE	EXCHANGE	(MO/DAY/YR)	B $1,001–$15,000	C $15,001–$50,000	D $50,001–$100,000	E $100,001–$250,000	F $250,001–$500,000	G $500,001–$1,000,000	H $1,000,001–$5,000,000	I $5,000,001–$25,000,000	J $25,000,001–$50,000,000	K Over $50,000,000
SP	*Example:* Mega Corporation Common Stock	X			10-12-97		X								
	Put Coca Cola Aug 070		X		8/7/97	X									
	Put Coca Cola Oct 060	X			9/2/97	X									
	Put Coca Cola Oct 060		X		9/12/97	X									
	Put Coca Cola Oct 060	X			9/25/97	X									
	Put Coca Cola Oct 060		X		10/17/97	X									
	Put Coca Cola Nov 060	X			8/1/97	X									
	Put Coca Cola Nov 060		X		8/15/97	X									
	Put Coca Cola Nov 060		X		8/27/97	X									
	Put Coca Cola Nov 060		X		10/17/97	X									
	Put Coca Cola Nov 060	X			10/29/97	X									
	Put Coca Cola Nov 060		X		10/30/97	X									
	Put Coca Cola Nov 060		X		10/31/97	X									
	Put Coca Cola Dec 060	X			10/30/97	X									
	Put Coca Cola Dec 060		X		11/17/97	X									
	Call Dell Computer Nov 080	X			10/31/97	X									
	Call Dell Computer Nov 080		X		11/17/97	X									

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SCHEDULE IV — TRANSACTIONS

Name: Spencer T. Bachus, III | Page 4 of 8

Report any purchase, sale, or exchange by you, your spouse, or dependent child during the reporting year of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child, or the purchase or sale of your personal residence, unless it is rented out.

SP, DC, JT	Asset	Type of Transaction			Date	Amount of Transaction										
		PURCHASE	SALE	EXCHANGE	(MO/DAY/YR)	B $1,001-$15,000	C $15,001-$50,000	D $50,001-$100,000	E $100,001-$250,000	F $250,001-$500,000	G $500,001-$1,000,000	H $1,000,001-$5,000,000	I $5,000,001-$25,000,000	J $25,000,001-$50,000,000	K Over $50,000,000
SP	*Example* Mega Corporation Common Stock	X			10-12-97		X								
	Put Walt Disney Jan 095	X			12/16/97	X									
	Put Walt Disney Jan 090	X			11/19/97	X									
	Put Walt Disney Jan 090	X			12/17/97	X									
	Put Walt Disney Oct 085	X			5/20/97	X									
	Put Walt Disney Oct 085		X		7/2/97	X									
	Put Walt Disney Oct 080	X			8/19/97	X									
	Put Walt Disney Oct 080		X		9/16/97	X									
	Put Gillette Co. Jan 090	X			11/4/97	X									
	Put Gillette Jan 090		X		11/17/97	X									
	Put Gillette Sep 095	X			8/1/97	X									
	Put Gillette Sep 095		X		8/13/97	X									
	Put Gillette Dec 080	X			8/19/97	X									
	Put Gillette Dec 080		X		9/5/97	X									
	Put IBM Nov 100	X			10/29/97	X									
	Put IBM Nov 100		X		10/30/97	X									

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SCHEDULE IV — TRANSACTIONS

Name: Spencer T. Bachus, III | Page 5 of 8

Report any purchase, sale, or exchange by you, your spouse, or dependent child during the reporting year of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child, or the purchase or sale of your personal residence, unless it is rented out.

SP, DC, JT	Asset	Type of Transaction: PURCHASE	SALE	EXCHANGE	Date (MO/DAY/YR)	Amount of Transaction: B ($1,001–$15,000)	C ($15,001–$50,000)	D ($50,001–$100,000)	E ($100,001–$250,000)	F ($250,001–$500,000)	G ($500,001–$1,000,000)	H ($1,000,001–$5,000,000)	I ($5,000,001–$25,000,000)	J ($25,000,001–$50,000,000)	K (Over $50,000,000)
SP	*Example* Mega Corporation Common Stock	X			10-12-97		X								
	Put Microsoft Jan 135 PSL	X			12/5/97	X									
	Put Microsoft Jan 135 PSL		X		12/15/97	X									
	Put Microsoft Oct 130 PSL	X			8/20/97	X									
	Put Microsoft Oct 130 PSL		X		8/28/97	X									
	Put Microsoft Nov 135 PSL	X			10/3/97	X									
	Put Microsoft Nov 135 PSL		X		10/28/97	X									
	Put Micron Tech Sept 055	X			8/7/97	X									
	Put Micron Tech Sept 055		X		8/13/97		X								
	Put Semi Conduct May 270 PBW	X			4/7/97	X									
	Put Semi Conduct May 270 PBW		X		4/11/97	X									
	Put Pepsico, Inc. May 325 CBOL	X			3/27/97	X									
	Put Pepsico May 325 CBOL	X			4/11/97	X									
	Put Pepsico May 325 CBOL		X		4/28/97	X									
	Put Pepsico Jul 325 CBOL	X			4/29/97	X									
	Put Pepsico Jul 325 CBOL	X			5/1/97	X									
	Put Pepsico Jul 035 CBOL	X			5/2/97	X									

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SCHEDULE IV — TRANSACTIONS

Report any purchase, sale, or exchange by you, your spouse, or dependent child during the reporting year of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child, or the purchase or sale of your personal residence, unless it is rented out.

SP, DC, JT	Asset	Type of Transaction			Date	Amount of Transaction									
		PURCHASE	SALE	EXCHANGE	(MO/DAY/YR)	B $1,001–$15,000	C $15,001–$50,000	D $50,001–$100,000	E $100,001–$250,000	F $250,001–$500,000	G $500,001–$1,000,000	H $1,000,001–$5,000,000	I $5,000,001–$25,000,000	J $25,000,001–$50,000,000	K Over $50,000,000
SP	*Example:* Mega Corporation Common Stock	X			10-12-97		X								
	Put Pepsico Aug 035	X			7/22/97	X									
	Put Pepsico Oct 37.5	X			8/1/97	X									
	Put Pepsico Oct 37.5	X			8/13/97	X									
	Put Pepsico Oct 37.5		X		8/15/97	X									
	Put Pepsico Oct 37.5		X		8/19/97	X									
	Put Presstek, Inc. May 055	X			4/7/97	X									
	Put Presstek May 055	X			4/15/97	X									
	Put Presstek Oct 47.5	X			9/5/97	X									
	Put Presstek Oct 47.5		X		9/30/97	X									
	Put Proctor Gamble Jan 070	X			11/4/97	X									
	Put Proctor Gamble Jan 070	X			11/12/97	X									
	Put Proctor Gamble Jan 080	X			12/16/97	X									
	Put Proctor Gamble Jul 150	X			7/9/97	X									
	Put Proctor Gamble Aug 145	X			7/7/97	X									
	Put Proctor Gamble Aug 145		X		8/8/97	X									

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SCHEDULE IV — TRANSACTIONS

Name: Spencer T. Bachus, III | Page 2 of 8

Report any purchase, sale, or exchange by you, your spouse, or dependent child during the reporting year of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child, or the purchase or sale of your personal residence, unless it is rented out.

SP, DC, JT	Asset	Type of Transaction: PURCHASE	SALE	EXCHANGE	Date (MO/DAY/YR)	Amount of Transaction: B ($1,001–$15,000)	C ($15,001–$50,000)	D ($50,001–$100,000)	E ($100,001–$250,000)	F ($250,001–$500,000)	G ($500,001–$1,000,000)	H ($1,000,001–$5,000,000)	I ($5,000,001–$25,000,000)	J ($25,000,001–$50,000,000)	K (Over $50,000,000)
SP	*Example:* Mega Corporation Common Stock	X			10-12-97		X								
	Put Proctor Gamble Aug 155	X			8/1/97	X									
	Put Proctor Gamble Aug 155		X		8/5/97	X									
	Put Proctor Gamble Oct 150	X			7/29/97	X									
	Put Proctor Gamble Oct 150		X		8/8/97	X									
	Put Proctor Gamble Oct 130	X			5/20/97	X									
	Put Proctor Gamble Oct 130	X			9/12/97	X									
	Put Proctor Gamble Oct 130	X			9/16/97	X									
	Put Proctor Gamble Nov 065	X			10/17/97	X									
	Put Proctor Gamble Nov 065		X		10/28/97	X									
	Call Sun Micro Oct 050	X			8/15/97	X									
	Call Sun Micro Oct 050		X		8/19/97	X									
	Put UAL Corp Jan 085	X			12/16/97	X									
	Put UAL Jan 085		X		12/17/97	X									
	Put UAL Jan 080	X			12/11/97	X									
	Put UAL Feb 090	X			11/4/97	X									
	Put UAL Feb 090		X		11/12/97	X									

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SCHEDULE IV — TRANSACTIONS

Name: Spencer T. Bachus, III | Page 8 of 8

Report any purchase, sale, or exchange by you, your spouse, or dependent child during the reporting year of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child, or the purchase or sale of your personal residence, unless it is rented out.

SP, DC, JT	Asset	Type of Transaction: PURCHASE	SALE	EXCHANGE	Date (MO/DAY/YR)	Amount of Transaction: B ($1,001–$15,000)	C ($15,001–$50,000)	D ($50,001–$100,000)	E ($100,001–$250,000)	F ($250,001–$500,000)	G ($500,001–$1,000,000)	H ($1,000,001–$5,000,000)	I ($5,000,001–$25,000,000)	J ($25,000,001–$50,000,000)	K (Over $50,000,000)
SP	*Example* Mega Corporation Common Stock	X			10-12-97		X								
	Put UAL Corp Feb 090	X			11/12/97	X									
	Put UAL Feb 090		X		11/17/97		X								
	Put UAL Dec 085	X			11/12/97	X									
	Put UAL Dec 085		X		11/17/97	X									
	Put UAL Dec 085	X			11/20/97	X									
	Put UAL Dec 085	X			11/21/97	X									

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Name	Spencer T. Bachus, III	Page 1 of 1

SCHEDULE V — LIABILITIES

Report liabilities of over $10,000 owed to any one creditor ***at any time*** during the reporting period by you, your spouse, or dependent child. Mark the highest amount owed during the year. **Exclude:** Any mortgage on your personal residence (unless it is rented out); loans secured by automobiles, household furniture, or appliances; and liabilities owed to a spouse, or the child, parent, or sibling of you or your spouse. Report ***revolving charge accounts*** only if the balance at the end of the reporting period exceeded $10,000.

SP, DC, JT	Creditor	Type of Liability	Amount of Liability									
			B $10,001 – $15,000	C $15,001 – $50,000	D $50,001 – $100,000	E $100,001 – $250,000	F $250,001 – $500,000	G $500,001 – $1,000,000	H $1,000,001 – $5,000,000	I $5,000,001 – $25,000,000	J $25,000,001 – $50,000,000	K Over $50,000,000
Example	First Bank of Wilmington, Delaware	Mortgage on 123 Main St., Dover, Del.				X						
	Regions Bank, Birmingham, AL	Mortgage, Civic Center Prof Bldg., Bham			X							
	Compass Bank, Birmingham, AL	Mortgage Rental Properties				X						

SCHEDULE VI — GIFTS

Report the source, a brief description, and the value of all gifts totalling more than $250 received by you, your spouse, or a dependent child from any source during the year.

Exclude: Gifts from relatives, gifts of personal hospitality of an individual, local meals, and gifts to a spouse or dependent child that are totally independent of his or her relationship to you. Gifts with a value of $100 or less need not be added towards the $250 disclosure threshold.

Note: The gift rule (House Rule 51) prohibits gifts except as specifically provided in the rule.

Source	Description	Value
Example: Mr. Joseph H. Smith, Anytown, Anystate	Silver Platter (determination on personal friendship received from Committee on Standards)	$270
	N/A	

Use additional sheets if more space is required.

Name	Spencer T. Bachus, III	Page 1 of 1

SCHEDULE VII —TRAVEL PAYMENTS AND REIMBURSEMENTS

Identify the source and list travel itinerary, dates, and nature of expenses provided for travel and travel-related expenses totalling more than $250 received by you, your spouse, or a dependent child during the reporting period. Indicate whether a family member accompanied the traveler at the sponsor's expense, and the amount of time, if any, that was not at the sponsor's expense. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor.

Exclude: Travel-related expenses provided by federal, state, and local governments, or by a foreign government required to be separately reported under the Foreign Gifts and Decorations Act (5 U.S.C. § 7342); travel paid for by a Federal political committee; travel provided to a spouse or dependent child that is totally independent of his or her relationship to you.

Source	Date(s)	Point of Departure—Destination—Point of Return	Lodging? (Y/N)	Food? (Y/N)	Was a Family Member Included? (Y/N)	Any time not at sponsor's expense
Examples: Chicago Chamber of Commerce	Mar. 2	Wash., D.C.—Chicago—Wash., D.C.	N	N	N	N
Roycroft Corporation	Aug. 6–13	Wash., D.C.—Los Angeles—Cleveland	Y	Y	Y	4 Days
National Railroad Construction & Maintenance Assoc.	Jan 10-14	Wash, DC - Scottsdale, AZ - Birmingham, AL	Y	Y	Y	N
Aspen Institute	Mar 7-9	Wash, DC - Hershey, PA - Wash, DC	Y	Y	Y	N
Assoc. of American Railroads	Apr 4-7	Bham, AL - Palm Beach, FL - Wash, DC	Y	Y	Y	N
Eastern General Manager's Association	Jul 11-13	Wash, DC - Cooperstown,NY - Wash, DC	Y	Y	Y	N
Burlington Northern Santa Fe	Sep 19-21	Wash, DC - Seattle/Spokane - Wash, DC	Y	Y	Y	N
Railway Tie Association	Oct 9-10	Wash, DC - Nashville, TN - Bham, AL	Y	Y	Y	N

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Name	Spencer T. Bachus, III	Page 1 of 1

SCHEDULE VIII — POSITIONS

Report all positions, compensated or uncompensated, held during the current calendar year as an officer, director, trustee of an organization, partner, proprietor, representative, employee, or consultant of any corporation, firm, partnership, or other business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States.

Exclude: Positions held in any religious, social, fraternal, or political entities; positions solely of an honorary nature; and positions listed on Schedule I.

Position	Name of Organization
	N/A

SCHEDULE IX — AGREEMENTS

Identify the date, parties to, and general terms of any agreement or arrangement with respect to: future employment; a leave of absence during the period of government service; continuation or deferral of payments by a former or current employer other than the U.S. Government; or continuing participation in an employee welfare or benefit plan maintained by a former employer.

Date	Parties To	Terms of Agreement
	N/A	

GPO 1998 46-260 (mac)

Use additional sheets if more space is required.

SPENCER T. BACHUS, III
8TH DISTRICT, ALABAMA

COMMITTEES
BANKING AND FINANCIAL INSTITUTIONS
CHAIRMAN, SUBCOMMITTEE ON GENERAL OVERSIGHT AND INVESTIGATIONS
TRANSPORTATION AND INFRASTRUCTURE
VETERANS' AFFAIRS

HAND DELIVERED

RECEIVED
98 FEB -2 PM 4:23

'97

442 CANNON BUILDING
WASHINGTON, DC 20515
(202) 225-4921

1900 INTERNATIONAL PARK DRIVE
SUITE 107
BIRMINGHAM, AL 35243
(205) 969-2298

NORTHPORT CIVIC CENTER
3648 McFARLAND BOULEVARD
PO DRAWER 369
NORTHPORT, AL 35476
(205) 333-9894

Congress of the United States
House of Representatives
Washington, DC

January 25, 1998

(1) ✓
HC

Mr. James V. Hansen, Chairman
Committee on Standards of Official Conduct
Washington, DC 20515-6328

RE: 1996 Financial Disclosure Amendment

Dear Chairman Hansen:

Please amend my 1996 financial disclosure statement as follows.

Please add to Schedule III "Assets & Unearned Income" my wife's ("SP") asset "Fidelity Puritan IRA" and mark the blocks as follows: value of asset "C" ($15,000 - $50,000), type of income "dividend", amount of income "IV" ($2,501 - $5,000). This account was inadvertently omitted from my previous disclosures.

Thank you.

Very truly yours,

Spencer Bachus
Member of Congress

Enclosure

PRINTED ON RECYCLED PAPER

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1997

Form A
For use by Members, officers, and employees

RECEIVED
98 MAY 14 PM 12:29
OFFICE OF THE CLERK
U.S. HOUSE OF REPRESENTATIVES

HAND DELIVERED (7)
(Office Use Only)

Henry Scott Baesler
(Full Name)

450 Canebrake Drive
(Mailing Address)

Lexington KY 40509

Daytime Telephone: (202)225-4706

Filer Status
[X] Member of the U.S. House of Representatives — State: KY, District: 06
[ ] Officer or Employee — Employing Office:

Report Type
[X] Annual (May 15)
[ ] Amendment
[ ] Termination — Termination Date:

A $200 penalty shall be assessed against anyone who files more than 30 days late.

PRELIMINARY INFORMATION -- ANSWER EACH OF THESE QUESTIONS

I. Did you or your spouse have "earned" income (e.g., salaries or fees) of $200 or more from any source in the reporting period? **If yes, complete and attach Schedule I.** Yes [X] No [ ]

II. Did any individual or organization make a donation to charity in lieu of paying you for a speech, apppearance, or article in the reporting period? **If yes, complete and attach Schedule II.** Yes [ ] No [X]

III. Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? **If yes, complete and attach Schedule III.** Yes [X] No [ ]

IV. Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset worth more than $1,000 in the reporting period? **If yes, complete and attach Schedule IV.** Yes [ ] No [X]

V. Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? **If yes, complete and attach Schedule V.** Yes [X] No [ ]

VI. Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $250 and not otherwise exempt)? **If yes, complete and attach Schedule VI.** Yes [ ] No [X]

VII. Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $250 from one source)? **If yes, complete and attach Schedule VII.** Yes [X] No [ ]

VIII. Did you hold any reportable positions on or before the date of filing in the current calendar year? **If yes, complete and attach Schedule VIII.** Yes [X] No [ ]

IX. Did you have any reportable agreement or arrangement with an outside entity? **If yes, complete and attach Schedule IX.** Yes [ ] No [X]

Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION -- ANSWER EACH OF THESE QUESTIONS

TRUSTS- Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child? (See Instructions, pages 10-11.) Yes [ ] No [X]

EXEMPTION Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption? (See Instructions, page 11.) Yes [ ] No [X]

CERTIFICATION -- THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended. The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct or its designee. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil penalties and criminal sanctions (See 5 U.S.C. app. 4, 104 and 18 U.S.C. 1001)

SIGNATURE OF REPORTING INDIVIDUAL: H. Scott Baesler

DATE (Month/Day/Year): 5-14-98

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SCHEDULE I -- EARNED INCOME

List the source, type, and amount of earned income from any source (other than the filer's current employment by the U.S. Government) totalling $200 or more during the preceding calendar year. For a spouse, list the source and amount of any honoraria; list only the source for other spouse earned income exceeding $1,000. For further information, see Instructions, pages 12-13

	Source	Type	Amount
Examples:	Keene State	Approved Teaching Fee	$10,000
	State of Maryland	Legislative Pension	$9,000
	Civil War Roundtable (Oct. 2nd)	Spouse Speech	$1,000
	Ontario County Board of Education	Spouse Salary	NA
	U.S. Congressman	Salary	$133,600.00
	Farm Income (Manager of Farm)	Spouse	NA
	Kentucky Department of Agriculture	Spouse	NA
	State of Kentucky	Mayoral Pension	$7,848.00

For payments to charity in lieu of honoraria, use Schedule II.

SCHEDULE III -- ASSETS AND "UNEARNED" INCOME

	BLOCK A **Asset and/or Income Source** Identify (a) each asset held for investment or production of income with a fair market value exceeding $1,000 at the end of the reporting year, and (b) any other asset or source of income which generated more than $200 in "unearned" income during the year. For rental property or land, provide an address. Provide full names of any mutual funds. For an IRA or retirement plan that is *self-directed*, list the underlying assets worth more than $1,000. For an IRA or retirement plan that is *not* self-directed, name the institution holding the account. **Exclude:** Your personal residence(s) (unless there is rental income); any debt owed to you by your spouse, or by your or your spouse's child, parent, or sibling; any deposits totalling $5,000 or less in personal savings accounts; any financial interests in or income derived from U.S. Government retirement programs. If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC) or is jointly held (JT), in the optional column on the far left. For further information, see Instructions, pages 14-20	BLOCK B **Value of Asset** at close of reporting year. If you use a valuation method other than fair market value, please specify the method used. If an asset was sold and is included only because it generated income, the value should be "None."	BLOCK C **Type of Income** If other than one of the listed categories, specify the type of income by writing a brief description in this block.	BLOCK D **Amount of Income** For IRA's and retirement plans that are *not* self-directed, you may write in "NA" for income.	BLOCK E **Transaction** Indicate if asset was purchased(P), sold(S), or exchanged(E) in reporting year
SP DC JT	*Examples:* SP Mega Corp. Stock SP 123 Main St., Dover, Del. 1st Bank of Paducah, KY accounts	$15,001 - $50,000 $250,001 - $500,000 $50,001 - $100,000	Dividends Rent Interest	$201 - $1,000 $1,001 - $2,500 $5,001 - $15,000	P
	Cash-Bank Accounts - Central Bank & Trust Co., Vine Street, Lexington, KY	$15,001 - $50,000	Interest	$1 - $200	
	Cash-Bank Accounts - Bank One, Main Street, Lexington, KY	$1,001 - $15,000	Interest	$1 - $200	
	Cash-Bank Accounts - Republic Bank, Alumni Drive, Lexington, KY	$1,001 - $15,000	Interest	$1 - $200	
	Houschold & Farm Property & Livestock Athens Boonesboro Road, Lexington, KY	$100,001 - $250,000	Capital Gains	$5,001 - $15,000	
	House - Lot - 5722 Athens Boonesboro Road	$100,001 - $250,000	Rent	$1,001 - $2,500	

SCHEDULE III -- ASSETS AND "UNEARNED" INCOME

	Farm - 2 Houses - Athens Boonesboro - 50 acres	$250,001 - $500,000	Rent	$5,001 - $15,000	
	House - Lot - 450 Canebrake Road	$250,001 - $500,000	None	None	P
	House - 20 acres - Athens Boonesboro Rd., Lexington, KY - Cane Brake	$100,001 - $250,000	None	None	
	One-half ownership in 295 Acre Development - 10 Acre Building Lots - Athens Boonesboro Rd., Lexington, KY 40509	$1,000,001 - $5,000,000	None	None	
	Tobacco Proceeds - Gross	None	Sale Proceeds	$50,001 - $100,000	
	Sale Contract - 2 commercial lots, Athens Boonesboro - Days Inn, Lexington	$100,001 - $250,000	Capital Gains	$5,001 - $15,000	

SCHEDULE V -- LIABILITIES

Report liabilities of over $10,000 owed to any one creditor ***at any time*** during the reporting period by you, your spouse, or dependent child. Mark the highest amount owed during the year.
Exclude: Any mortgage on your personal residence (unless it is rented out), loans secured by automobiles, household furniture, or appliances, and liabilities owed to a spouse, or the child, parent, or sibling of you or your spouse. Report ***revolving charge accounts*** only if the balance at the end of the reporting period exceeded $10,000. For further information, see Instructions, pages 21-22

SP,DC,JT	Creditor	Type of Liability	Amount of Liability
	Example First Bank of Wilmington, Delaware	Mortgage on 123 Main St., Dover, Del	$100,001 - $250,000
	Central Bank - Lexington, KY	Open Notes	$50,001 - $100,000
	Mary Margaret Terrell, Lexington, KY	Mortgage on 295 Acre Development	$250,001 - $500,000
	Robert Woods, Lexington, KY	Note - Development Cane Brake	$250,001 - $500,000
	Bank One, Lexington, KY	Mortgage - Commercial Lots on Athens Boonesboro Road	$50,001 - $100,000
	Central Bank - Lexington, KY	Mortgages on House - Lot - 5722 Athens Boonesboro - Farm - 20 Acre Lot and two 10 Acre Tracts	$500,001 - $1,000,000
	Republic Bank - Lexington, KY	Open Note -- construction	$15,001 - $50,000
	Robert Woods - Lexington, KY	Note on 450 Canebrake Road	$100,001 - $250,000

SCHEDULE VII -- TRAVEL PAYMENTS AND REIMBURSEMENTS

Identify the source and list travel itinerary, dates, and nature of expenses provided for travel and travel-related expenses totalling more than $250 received by you, your spouse, or a dependent child during the reporting period. Indicate whether a family member accompanied the traveler at the sponsor's expense, and the amount of time, if any, that was not at the sponsor's expense. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor.
Exclude: Travel-related expenses provided by federal, state and local governments, or by a foreign government required to be separately reported under the Foreign Gifts and Decorations Act (5 U.S.C. 7342), travel paid for by a Federal political committee, travel provided to a spouse or dependent child that is totally independent of his or her relationship to you. For further information, see Instructions, pages 24-26.

Source	Date(s)	Point of Departure--Destination--Point of Return	Lodging? (Y/N)	Food? (Y/N)	Was a Family Member Included? (Y/N)	Any time not at sponsor's expense
Examples Chicago Chamber of Commerce	Mar 2	Wash , D C -Chicago-Wash , D C	N	N	N	N
Mega Corporation	Aug 6-13	Wash , D C -Los Angeles-Cleveland	Y	Y	Y	4 Days
Tobacco Institute	February 13-16, 1997	Wash , D C -Scottsdale-Wash , D C	Y	Y	Y	No

SCHEDULE VIII -- POSITIONS

Report all positions, compensated or uncompensated, held during the current calendar year as an officer, director, trustee of an organization, partner, proprietor, representative, employee, or consultant of any corporation, firm, partnership, or other business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States. For further information, see Instructions, page 26

Exclude: Positions held in any religious, social, fraternal, or political entities, positions solely of an honorary nature, and positions listed on Schedule I.

Position	Organization
Partner	Farm Operation -- BW Partnership (see schedule I)

SCOTTY BAESLER
6TH DISTRICT
KENTUCKY

COMMITTEES
AGRICULTURE
BUDGET
VETERANS' AFFAIRS
(on leave)

Congress of the United States
House of Representatives
Washington, DC 20515

OFFICES
2463 RAYBURN BUILDING
WASHINGTON, DC 20515
(202) 225-4706

401 WEST MAIN STREET
SUITE 318
LEXINGTON, KY 40507
(606) 253-1124

June 4, 1998

HAND DELIVERED

(2)

98 JUN -4 PM 2:27

Honorable Robin H. Clarke
Clerk
U.S. House of Representatives
Room H-154, Capitol
Washington, D.C. 20515

Dear Robin:

In reviewing my Financial Disclosure Statement for Calendar Year 1997, I discovered that I inadvertently left out Schedule IV -- Transactions.

Consequently, I would appreciate if if you would amend my Financial Disclosure Statement for 1997 with the attached Schedule IV which I am forwarding to you herewith.

Thank you for your assistance in this matter.

Sincerely,

Scotty Baesler

Scotty Baesler
Member of Congress

SB/sba
Enclosure

Name Henry Scott Baesler	Page ___ of ___

SCHEDULE IV -- TRANSACTIONS

Report any purchase, sale, or exchange by you, your spouse, or dependent child during the reporting year of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child, or the purchase or sale of your personal residence, unless it is rented out. For further information, see Instructions, pages 20-21.

SP,DC,JT	Asset	Type of Transaction	Date	Amount of Transaction
	Example: Mega Corporation Common Stock	Purchase	10/12/94	$15,001 - $50,000
	Purchase - House - Lot - 450 Canebrake Road	Purchase	10-11-97	$250,001 - $500,000

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1997

FORM A
For use by Members, officers, and employees

98 MAY 15 PM 12:12

CLERK OF THE CLERK
U.S. HOUSE OF REPRESENTATIVES

Richard H. Baker
(Full Name)

434 Cannon House Office Building
(Mailing Address)

Washington, DC 20515

Daytime Telephone: 202-225-3901

(Office Use Only)

Filer Status	[X] Member of the U.S. House of Representatives	State: Louisiana District: 6th	[ ] Officer or Employee	Employing Office	
Report Type	[X] Annual (May 15)	[ ] Amendment	[ ] Termination	Termination Date	

A *$200 penalty* shall be assessed against anyone who files more than 30 days late.

PRELIMINARY INFORMATION — ANSWER EACH OF THESE QUESTIONS

I	Did you or your spouse have "earned" income (e.g., salaries or fees) of $200 or more from any source in the reporting period? **If yes, complete and attach Schedule I.**	Yes [X]	No [ ]	VI Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $250 and not otherwise exempt)? **If yes, complete and attach Schedule VI.**	Yes [ ] No [X]
II	Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? **If yes, complete and attach Schedule II.**	Yes [ ]	No [X]	VII Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $250 from one source)? **If yes, complete and attach Schedule VII.**	Yes [ ] No [X]
III	Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? **If yes, complete and attach Schedule III.**	Yes [X]	No [ ]	VIII Did you hold any reportable positions on or before the date of filing in the current calendar year? **If yes, complete and attach Schedule VIII.**	Yes [X] No [ ]
IV	Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset worth more than $1,000 in the reporting period? **If yes, complete and attach Schedule IV.**	Yes [X]	No [ ]	IX Did you have any reportable agreement or arrangement with an outside entity? **If yes, complete and attach Schedule IX.**	Yes [ ] No [X]
V	Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? **If yes, complete and attach Schedule V.**	Yes [X]	No [ ]	**Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.**	

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION — ANSWER EACH OF THESE QUESTIONS

TRUSTS—Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child?	Yes [ ]	No [X]
EXEMPTION—Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption?	Yes [ ]	No [X]

CERTIFICATION — THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended. The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct or its designee. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil penalties and criminal sanctions (*See* 5 U.S.C. app. 4, §104 and 18 U.S.C. §1001)

SIGNATURE OF REPORTING INDIVIDUAL: R H Baker

DATE (Month/Day/Year): 5/14/98

SCHEDULE I — EARNED INCOME

List the source, type, and amount of earned income from any source (other than the filer's current employment by the U.S. Government) totalling $200 or more during the preceding calendar year. For a spouse, list the source and amount of any honoraria; list only the source for other spouse earned income exceeding $1,000.

	Source	Type	Amount
Examples	Keene State	Approved Teaching Fee	$6,000
	State of Maryland	Legislative Pension	$9,000
	Civil War Roundtable (Oct 2nd)	Spouse Speech	$1,000
	Ontario County Board of Education	Spouse Salary	NA
	K's Louisiana Market	Spouse Salary	NA
	Baker Agency	Spouse Salary	NA

For payments to charity in lieu of honoraria, use Schedule II.

SCHEDULE II — PAYMENTS IN LIEU OF HONORARIA MADE TO CHARITY

List the source, activity (i.e., speech, appearance, or article), date, and amount of any payment made by the sponsor of an event to a charitable organization in lieu of an honorarium. A separate confidential list of charities receiving such payments must be filed directly with the Committee on Standards of Official Conduct. An envelope for transmitting the list is included in each Member's filing package.

Source	Activity	Date	Amount
Examples Association of American Associations, Wash., D.C.	Speech	Feb 2, 1997	$2,000
XYZ Magazine	Article	Aug. 13, 1997	$500
The Washington Financial Forum Ltd.	Speech	March 6, 1997	$1,000
The Trust Reasearch Seminar Ltd.	Speech	September 24, 1997	$1,000

This page may be copied if more space is required.

SCHEDULE III — ASSETS AND "UNEARNED" INCOME

Name Richard H. Baker — Page 4 of 8

BLOCK A — Asset and/or Income Source

Identify (a) each asset held for investment or production of income with a fair market value exceeding $1,000 at the end of the reporting year, and (b) any other asset or source of income which generated more than $200 in "unearned" income during the year. For rental property or land, provide an address. Provide full names of any mutual funds. For an IRA or retirement plan that is *self-directed*, list the underlying assets worth more than $1,000. For an IRA or retirement plan that is not selfdirected, name the institution holding the account.

Exclude: Your personal residence(s) (unless there is rental income); any debt owed to you by your spouse, or by your or your spouse's child, parent, or sibling; any deposits totalling $5,000 or less in personal savings accounts; any financial interests in or income derived from U.S. Government retirement programs.

If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC) or is jointly held (JT), in the optional column on the far left.

BLOCK B — Value of Asset

at close of reporting year. If you use a valuation method other than fair market value, please specify the method used. If an asset was sold and is included only because it generated income, the value should be "None."

BLOCK C — Type of Income

BLOCK D — Amount of Income

For IRA's and retirement plans that are *not* self-directed, you may write in "NA" for income.

BLOCK E — Transaction

Indicate if asset was purchased (P), sold (S), or exchanged (E) in reporting year.

	BLOCK A	BLOCK B												BLOCK C							BLOCK D											BLOCK E
		A None	B $1 – $1,000	C $1,001 – $15,000	E $15,001 – $50,000	F $50,001 – $100,000	G $100,001 – $250,000	H $250,001 – $500,000	I $500,001 – $1,000,000	J $1,000,001 – $5,000,000	K $5,000,001 – $25,000,000	L $25,000,001 – $50,000,000	Over $50,000,000	DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Type of Income (Specify. For Example: Partnership Income or Farm Income)	I None	II $1 – $200	III $201 – $1,000	IV $1,001 – $2,500	V $2,501 – $5,000	VI $5,001 – $15,000	VII $15,001 – $50,000	VIII $50,001 – $100,000	IX $100,001 – $1,000,000	X $1,000,001 – $5,000,000	XI Over $5,000,000	P, S, E
SP DC JT	*Examples*		Indefinite			X								X						Royalties				X		X					P
	LPB Minerals			X										X									X								
	Glacier Technology			X																	X										
	Baker Agency				X																X										
SP	K's Louisiana Market					X										X										X					S
	Scenic Investments			X																	X										

For additional assets and unearned income, use next page.

SCHEDULE III — ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Name Richard H. Baker

SP. DC. JT	BLOCK A Asset and/or Income Source	BLOCK B Year-End Value of Asset												BLOCK C Type of Income							BLOCK D Amount of Income										BLOCK E Transaction
		A None	B $1 – $1,000	C $1,001 – $15,000	D $15,001 – $50,000	E $50,001 – $100,000	F $100,001 – $250,000	G $250,001 – $500,000	H $500,001 – $1,000,000	I $1,000,001 – $5,000,000	J $5,000,001 – $25,000,000	K $25,000,001 – $50,000,000	L Over $50,000,000	DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Type of Income (Specify)	I None	II $1 – $200	III $201 – $1,000	IV $1,001 – $2,500	V $2,501 – $5,000	VI $5,001 – $15,000	VII $15,001 – $50,000	VIII $50,001 – $100,000	IX $100,001 – $1,000,000	X $1,000,001 – $5,000,000	XI Over $5,000,000	P, S, E
	AES, Inc. (Stock)			X																											
	RES, Inc. (Stock)			X																											

This page may be copied if more space is required.

SCHEDULE IV — TRANSACTIONS

Name Richard H. Baker | Page 6 of 8

Report any purchase, sale, or exchange by you, your spouse, or dependent child during the reporting year of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child, or the purchase or sale of your personal residence, unless it is rented out.		Type of Transaction			Date	Amount of Transaction									
		PURCHASE	SALE	EXCHANGE	(MO/DAY/YR)	B $1,001–$15,000	C $15,001–$50,000	D $50,001–$100,000	E $100,001–$250,000	F $250,001–$500,000	G $500,001–$1,000,000	H $1,000,001–$5,000,000	I $5,000,001–$25,000,000	J $25,000,001–$50,000,000	K Over $50,000,000
SP, DC, JT	**Asset**														
SP	*Example* Mega Corporation Common Stock	X			10–12–97		X								
SP	K's Louisiana Market		X		09/12/97		X								

This page may be copied if more space is required.

SCHEDULE V — LIABILITIES

Report liabilities of over $10,000 owed to any one creditor ***at any time*** during the reporting period by you, your spouse, or dependent child. Mark the highest amount owed during the year. **Exclude:** Any mortgage on your personal residence (unless it is rented out); loans secured by automobiles, household furniture, or appliances; and liabilities owed to a spouse, or the child, parent, or sibling of you or your spouse. Report ***revolving charge accounts*** only if the balance at the end of the reporting period exceeded $10,000.

SP, DC, JT	Creditor	Type of Liability	Amount of Liability										
			B $10,001 – $15,000	C $15,001 – $50,000	D $50,001 – $100,000	E $100,001 – $250,000	F $250,001 – $500,000	G $500,001 – $1,000,000	H $1,000,001 – $5,000,000	I $5,000,001 – $25,000,000	J $25,000,001 – $50,000,000	K Over $50,000,000
	Example: First Bank of Wilmington, Delaware	Mortgage on 123 Main St., Dover, Del.				X						
	Hancock Bank , Baton Rouge, Louisiana	Commercial Loan			X							
	City National, Baton Rouge, Louisiana	Commercial Loan		X								

SCHEDULE VI — GIFTS

Report the source, a brief description, and the value of all gifts totalling more than $250 received by you, your spouse, or a dependent child from any source during the year

Exclude: Gifts from relatives, gifts of personal hospitality of an individual, local meals, and gifts to a spouse or dependent child that are totally independent of his or her relationship to you. Gifts with a value of $100 or less need not be added towards the $250 disclosure threshold.

Note: The gift rule (House Rule 51) prohibits gifts except as specifically provided in the rule.

Source	Description	Value
Example. Mr. Joseph H. Smith, Anytown, Anystate	Silver Platter (determination on personal friendship received from Committee on Standards)	$270

Use additional sheets if more space is required.

SCHEDULE VIII — POSITIONS

Report all positions, compensated or uncompensated, held during the current calendar year as an officer, director, trustee of an organization, partner, proprietor, representative, employee, or consultant of any corporation, firm, partnership, or other business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States

Exclude: Positions held in any religious, social, fraternal, or political entities; positions solely of an honorary nature; and positions listed on Schedule I

Position	Name of Organization
Partner	LPB Minerals (uncompensated)
Partner	Scenic Investments (uncompensated)
Officer	Baker Agency (uncompensated)
Officer	RES, Inc. (uncompensated)

SCHEDULE IX — AGREEMENTS

Identify the date, parties to, and general terms of any agreement or arrangement with respect to: future employment; a leave of absence during the period of government service; continuation or deferral of payments by a former or current employer other than the U.S. Government; or continuing participation in an employee welfare or benefit plan maintained by a former employer.

Date	Parties To	Terms of Agreement

GPO 1998 46-260 (mac)

Use additional sheets if more space is required.

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1997

FORM A
For use by Members, officers, and employees

RECEIVED
HOUSE RECORDS CENTER
98 MAY 15 PM 12:48
OFFICE OF THE CLERK
U.S. HOUSE OF REPRESENTATIVES
HAND DELIVERED
MC
(Office Use Only)

Richard H. Baker
(Full Name)

434 Cannon House Office Building
(Mailing Address)

Washington, DC 20515

Daytime Telephone: 202-225-3901

Filer Status
- [X] Member of the U S House of Representatives — State: Louisiana, District: 6th
- [ ] Officer or Employee — Employing Office:

Report Type
- [X] Annual (May 15)
- [X] Amendment
- [ ] Termination — Termination Date:

A *$200 penalty* shall be assessed against anyone who files more than 30 days late.

PRELIMINARY INFORMATION — ANSWER EACH OF THESE QUESTIONS

I Did you or your spouse have "earned" income (e.g., salaries or fees) of $200 or more from any source in the reporting period? **If yes, complete and attach Schedule I.**	Yes [X] No [ ]	VI Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $250 and not otherwise exempt)? **If yes, complete and attach Schedule VI.**	Yes [ ] No [X]
II Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? **If yes, complete and attach Schedule II.**	Yes [X] No [ ]	VII. Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $250 from one source)? **If yes, complete and attach Schedule VII.**	Yes [ ] No [X]
III Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? **If yes, complete and attach Schedule III.**	Yes [X] No [ ]	VIII. Did you hold any reportable positions on or before the date of filing in the current calendar year? **If yes, complete and attach Schedule VIII.**	Yes [X] No [ ]
IV Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset worth more than $1,000 in the reporting period? **If yes, complete and attach Schedule IV.**	Yes [X] No [ ]	IX. Did you have any reportable agreement or arrangement with an outside entity? **If yes, complete and attach Schedule IX.**	Yes [ ] No [X]
V Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? **If yes, complete and attach Schedule V.**	Yes [X] No [ ]	**Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.**	

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION — ANSWER EACH OF THESE QUESTIONS

TRUSTS—Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child?	Yes [ ] No [X]
EXEMPTION—Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption?	Yes [ ] No [X]

CERTIFICATION — THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended. The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct or its designee. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil penalties and criminal sanctions (*See* 5 U.S.C. app. 4, §104 and 18 U.S.C. §1001).

SIGNATURE OF REPORTING INDIVIDUAL: P H Baker — DATE (Month/Day/Year): 5/15/98

UNITED STATES HOUSE OF REPRESENTATIVES
FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1997

FORM A
For use by Members, officers, and employees

RECEIVED
98 APR 23 AM 9 37
OFFICE OF THE CLERK
HOUSE OF REPRESENTATIVES
(4)
(Office Use Only)

JOHN ELIAS BALDACCI
(Full Name)

79 PALM STREET
(Mailing Address)

Daytime Telephone
BANGOR, MAINE 04401 207-947-6088

Filer Status	[X] Member of the U.S. House of Representatives	State MAINE District SECOND	[ ] Officer or Employee	Employing Office
Report Type	[X] Annual (May 15)	[ ] Amendment	[ ] Termination	Termination Date

A *$200 penalty* shall be assessed against anyone who files more than 30 days late.

PRELIMINARY INFORMATION — ANSWER EACH OF THESE QUESTIONS

I	Did you or your spouse have "earned" income (e.g., salaries or fees) of $200 or more from any source in the reporting period? **If yes, complete and attach Schedule I.**	Yes [X]	No [ ]	
II	Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? **If yes, complete and attach Schedule II.**	Yes [ ]	No [X]	
III	Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? **If yes, complete and attach Schedule III.**	Yes [X]	No [ ]	
IV	Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset worth more than $1,000 in the reporting period? **If yes, complete and attach Schedule IV.**	Yes [ ]	No [X]	
V	Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? **If yes, complete and attach Schedule V.**	Yes [ ]	No [X]	
VI	Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $250 and not otherwise exempt)? **If yes, complete and attach Schedule VI.**	Yes [ ]	No [X]	
VII	Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $250 from one source)? **If yes, complete and attach Schedule VII.**	Yes [ ]	No [X]	
VIII	Did you hold any reportable positions on or before the date of filing in the current calendar year? **If yes, complete and attach Schedule VIII.**	Yes [ ]	No [X]	
IX	Did you have any reportable agreement or arrangement with an outside entity? **If yes, complete and attach Schedule IX.**	Yes [ ]	No [X]	

Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION — ANSWER EACH OF THESE QUESTIONS

TRUSTS—Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child?	Yes [ ]	No [X]	
EXEMPTION—Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption?	Yes [ ]	No [X]	

CERTIFICATION — THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended. The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct or its designee. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil penalties and criminal sanctions (*See* 5 U.S.C. app. 4, §104 and 18 U.S.C. §1001).

SIGNATURE OF REPORTING INDIVIDUAL: John Baldacci

DATE (Month/Day/Year): 4/21/98

Name JOHN ELIAS BALDACCI	Page 1 of 3

SCHEDULE I — EARNED INCOME

List the source, type, and amount of earned income from any source (other than the filer's current employment by the U.S. Government) totalling $200 or more during the preceding calendar year. For a spouse, list the source and amount of any honoraria; list only the source for other spouse earned income exceeding $1,000.

	Source	Type	Amount
Examples	Keene State	Approved Teaching Fee	$6,000
	State of Maryland	Legislative Pension	$9,000
	Civil War Roundtable (Oct. 2nd)	Spouse Speech	$1,000
	Ontario County Board of Education	Spouse Salary	NA
	CITY OF BANGOR 73 HARLOW STREET BANGOR, MAINE 04401	SPOUSE SALARY	NA

For payments to charity in lieu of honoraria, use Schedule II.

SCHEDULE III — ASSETS AND "UNEARNED" INCOME

Name JOHN ELIAS BALDACCI | Page 2 of 3

BLOCK A — Asset and/or Income Source

Identify (a) each asset held for investment or production of income with a fair market value exceeding $1,000 at the end of the reporting year, and (b) any other asset or source of income which generated more than $200 in "unearned" income during the year. For rental property or land, provide an address. Provide full names of any mutual funds. For an IRA or retirement plan that is *self-directed*, list the underlying assets worth more than $1,000. For an IRA or retirement plan that is not selfdirected, name the institution holding the account.

Exclude: Your personal residence(s) (unless there is rental income); any debt owed to you by your spouse, or by your or your spouse's child, parent, or sibling; any deposits totalling $5,000 or less in personal savings accounts; any financial interests in or income derived from U.S. Government retirement programs.

If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC) or is jointly held (JT), in the optional column on the far left.

BLOCK B — Value of Asset

at close of reporting year
If you use a valuation method other than fair market value, please specify the method used
If an asset was sold and is included only because it generated income, the value should be "None."

BLOCK C — Type of Income

BLOCK D — Amount of Income

For IRA's and retirement plans that are *not* self-directed, you may write in "NA" for income.

BLOCK E — Transaction

Indicate if asset was purchased (P), sold (S), or exchanged (E) in reporting year

	BLOCK A	BLOCK B													BLOCK C							BLOCK D										BLOCK E
		A None	B $1 – $1,000	C $1,001 – $15,000	$15,001 – $50,000	E $50,001 – $100,000	F $100,001 – $250,000	G $250,001 – $500,000	H $500,001 – $1,000,000	I $1,000,001 – $5,000,000	J $5,000,001 – $25,000,000	K $25,000,001 – $50,000,000	L Over $50,000,000	DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Type of Income (Specify. For Example, Partnership Income or Farm Income)	I None	II $1 – $200	III $201 – $1,000	IV $1,001 – $2,500	V $2,501 – $5,000	VI $5,001 – $15,000	VII $15,001 – $50,000	VIII $50,001 – $100,000	IX $100,001 – $1,000,000	X $1,000,001 – $5,000,000	XI Over $5,000,000	P, S, E
SP	Examples					X								X											X							P
DC				Indefinite																Royalties												
JT							X									X										X						
	BANGOR SAVINGS BANK P.O. BOX 930, BANGOR MAINE 04402 (savings)			X												X							X									
JT	KEY BANK OF MAINE P.O. BOX 429, AUGUSTA MAINE 04330 (cd)		X													X						X										

For additional assets and unearned income, use next page.

SCHEDULE III — ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Name JOHN ELIAS BALDACCI | Page 3 of 3

SP, DC, JT	BLOCK A Asset and/or Income Source	BLOCK B Year-End Value of Asset												BLOCK C Type of Income							BLOCK D Amount of Income										BLOCK E Transaction
		A None	B $1 – $1,000	C $1,001 – $15,000	D $15,001 – $50,000	E $50,001 – $100,000	F $100,001 – $250,000	G $250,001 – $500,000	H $500,001 – $1,000,000	I $1,000,001 – $5,000,000	J $5,000,001 – $25,000,000	K $25,000,001 – $50,000,000	L Over $50,000,000	DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Type of Income (Specify)	I None	II $1 – $200	III $201 – $1,000	IV $1,001 – $2,500	V $2,501 – $5,000	VI $5,001 – $15,000	VII $15,001 – $50,000	VIII $50,001 – $100,000	IX $100,001 – $1,000,000	X $1,000,001 – $5,000,000	XI Over $5,000,000	P, S, E
	CONG. FED. CR. UNION P.O. BOX 23267 WASHINGTON, D.C. 20026 (money-market)					X										X								X							
	NORTHERN NEW ENGLAND LAW PUBLISHERS, INC. P.O. BOX 38 NAPLES, MAINE 04055 (stock)			X										X									X							
SP	ICMA RETIREMENT TRUST 777 N. CAPITOL ST, NE WASH. D.C. 20002-4240			X												X							X							
SP	TRAVELERS INSURANCE ANNUITY SERVICES ONE TOWER SQUARE HARTFORD, CT 06183			X												X							X							
	MAINE STATE RETIREMENT SYSTEM AUGUSTA, MAINE 04330			X												X							X							
SP	MAINE STATE RETIREMENT SYSTEM AUGUSTA, MAINE 04330			X												X							X							

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UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1997

Form A
For use by Members, officers, and employees

(Office Use Only)

THOMAS CASS BALLENGER
(Full Name)

867 20TH AVENUE DRIVE, NW
(Mailing Address)

HICKORY NC 28601

Daytime Telephone
(202) 225-2576

Filer Status	[X] Member of the U S House of Representatives	State NC District 10	[ ] Officer or Employee	Employing Office	
Report Type	[X] Annual (May 15)	[ ] Amendment		[ ] Termination	Termination Date

A $200 penalty shall be assessed against anyone who files more than 30 days late.

PRELIMINARY INFORMATION -- ANSWER EACH OF THESE QUESTIONS

I Did you or your spouse have "earned" income (e g , salaries or fees) of $200 or more from any source in the reporting period?
If yes, complete and attach Schedule I. Yes [X] No [ ]

II Did any individual or organization make a donation to charity in lieu of paying you for a speech, apppearance, or article in the reporting period?
If yes, complete and attach Schedule II. Yes [X] No [ ]

III Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period?
If yes, complete and attach Schedule III. Yes [X] No [ ]

IV Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset worth more than $1,000 in the reporting period?
If yes, complete and attach Schedule IV. Yes [X] No [ ]

V Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period?
If yes, complete and attach Schedule V. Yes [ ] No [X]

VI Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i e , aggregating more than $250 and not otherwise exempt)?
If yes, complete and attach Schedule VI. Yes [ ] No [X]

VII Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $250 from one source)?
If yes, complete and attach Schedule VII. Yes [X] No [ ]

VIII Did you hold any reportable positions on or before the date of filing in the current calendar year?
If yes, complete and attach Schedule VIII. Yes [X] No [ ]

IX Did you have any reportable agreement or arrangement with an outside entity?
If yes, complete and attach Schedule IX. Yes [X] No [ ]

Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION -- ANSWER EACH OF THESE QUESTIONS

TRUSTS- Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed Have you excluded from this report details of such a trust benefitting you, your spouse, or dependent child? (See Instructions, pages 10-11.) Yes [ ] No [X]

EXEMPTION Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption? (See Instructions, page 11.) Yes [ ] No [X]

CERTIFICATION -- THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct or its designee Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil penalties and criminal sanctions (See 5 U S C app 4, 104 and 18 U.S.C 1001)

SIGNATURE OF REPORTING INDIVIDUAL: Thomas Cass Ballenger

DATE (Month/Day/Year): 5/14/98

SCHEDULE I -- EARNED INCOME

List the source, type, and amount of earned income from any source (other than the filer's current employment by the U.S. Government) totalling $200 or more during the preceding calendar year. For a spouse, list the source and amount of any honoraria, list only the source for other spouse earned income exceeding $1,000. For further information, see Instructions, pages 12-13.

	Source	Type	Amount
	Keene State	Approved Teaching Fee	$10,000
	State of Maryland	Legislative Pension	$9,000
Examples	Civil War Roundtable (Oct. 2nd)	Spouse Speech	$1,000
	Ontario County Board of Education	Spouse Salary	NA
	PLASTIC PACKAGING, INC - FAMILY BUSINESS	SALARY EXEMPT FROM RULE XLVII	20000
	PLASTIC PACKAGING, INC.	SPOUSE SALARY	N/A
	LEGISLATIVE RETIREMENT SYSTEM OF NC	PENSION	4166

For payments to charity in lieu of honoraria, use Schedule II.

SCHEDULE II -- PAYMENTS IN LIEU OF HONORARIA MADE TO CHARITY

List the source, activity (i e , speech, appearance, or article), date, and amount of any payment made by the sponsor of an event to a charitable organization in lieu of an honorarium
A separate confidential list of charities receiving such payments must be filed directly with the Committe on Standards of Official Conduct An envelope for transmitting the list is included in each Member's filing package For further information, see Instructions, pages 13-14

Source		Activity	Date	Amount
Examples	Association of American Associations, Wash , D C	Speech	Feb 2, 1994	$2,000
	XYZ Magazine	Article	Aug 13, 1994	$500
R J REYNOLDS EXECUTIVES, WASH , D C		SPEECH	2/11/97	$ 2,000
TOBACCO INSTITUTE, WASH , D C		SPEECH	4/15/97	$ 2,000
AMERICAN RENTAL ASSOCIATION, ARLINGTON, VA		SPEECH	4/29/97	$ 500

SCHEDULE III -- ASSETS AND "UNEARNED" INCOME

BLOCK A **Asset and/or Income Source** Identify (a) each asset held for investment or production of income with a fair market value exceeding $1,000 at the end of the reporting year, and (b) any other asset or source of income which generated more than $200 in "unearned" income during the year. For rental property or land, provide an address. Provide full names of any mutual funds. For an IRA or retirement plan that is *self-directed*, list the underlying assets worth more than $1,000. For an IRA or retirement plan that is *not* self-directed, name the institution holding the account. **Exclude:** Your personal residence(s) (unless there is rental income), any debt owed to you by your spouse, or by your or your spouse's child, parent, or sibling, any deposits totalling $5,000 or less in personal savings accounts, any financial interests in or income derived from U.S. Government retirement programs. If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC) or is jointly held (JT), in the optional column on the far left For further information, see Instructions, pages 14-20	BLOCK B **Value of Asset** at close of reporting year If you use a valuation method other than fair market value, please specify the method used If an asset was sold and is included only because it generated income, the value should be "None."	BLOCK C **Type of Income** If other than one of the listed categories, specify the type of income by writing a brief description in this block Rent % = Royalty Income	BLOCK D **Amount of Income** For IRA's and retirement plans that are *not* self-directed, you may write in "NA" for income	BLOCK E **Transaction** Indicate if asset was purchased(P), sold(S), or exchanged(E) in reporting year
SP DC *Examples* JT	SP Mega Corp. Stock SP 123 Main St., Dover, Del 1st Bank of Paducah, KY accounts	$15,001 - $50,000 $250,001 - $500,000 $50,001 - $100,000	Dividends Rent Interest	$201 - $1,000 $1,001 - $2,500 $5,001 - $15,000	P
JT	RENTAL HOUSE, 12TH AVENUE	$50,001 - $100,000	Rent	$2,501 - $5,000	
JT	RENTAL HOUSE, YORKLAND RD	$50,001 - $100,000	Rent	$5,001 - $15,000	
JT	WASHINGTON APT , 450 JERSEY AVE	$250,001 - $500,000	Rent	$5,001 - $15,000	
	GLENDALE PROSPECT #1-H WELL	$1,001 - $15,000	Rent - %	$201 - $1,000	
	NORTON/TAYLOR	$1,001 - $15,000	Rent - %	$1,001 - $2,500	
	KATHY KAY #1-H WELL	$1,001 - $15,000	Rent - %	$201 - $1,000	
	TRAWEEK PROSPECT #1-H WELL	$1,001 - $15,000	Rent - %	None - $200	P
	HEINE PROSPECT #1-H WELL	$1,001 - $15,000	Rent - %	None - $200	P
	GREAT WESTERN WELCH '7777'	None - $1,000	Rent - %	None - $200	S

SCHEDULE III -- ASSETS AND "UNEARNED" INCOME

	TROUSDALE #1	$1,001 - $15,000	Rent - %	$201 - $1,000	
	RAYMOND JAMES & ASSOC BROKER ACCT				
	HERITAGE CASH TRUST MONEY MRKT FUND	$1,001 - $15,000	Dividends	$1,001 - $2,500	
	AIR PRODUCTS & CHEMICALS, INC.	$1,001 - $15,000	Dividends	None - $200	
	THE ALLSTATE CORPORATION	$1,001 - $15,000	Dividends	None - $200	
	ALCATEL ALSTHOM AMERICAN	$15,001 - $50,000	Dividends	$201 - $1,000	
	AMERICAN STORES CO NEW	None - $1,000	Dividends	None - $200	Gifted
	ARMSTRONG WORLD INDUSTRIES	$15,001 - $50,000	Dividends	None - $200	P
	BB & T CORPORATION	$15,001 - $50,000	Dividends	None - $200	
	BANC ONE CORPORATION	$15,001 - $50,000	Dividends	$201 - $1,000	
	CPC INTERNATIONAL	$15,001 - $50,000	Dividends	$201 - $1,000	
	COMMSCOPE, INC	$1,001 - $15,000	Dividends	None - $200	P
	CORNING, INC	$1,001 - $15,000	Dividends	None - $200	P
	CROWN CORK & SEAL CO	None - $1,000	Dividends	None - $200	Gifted
	DISNEY (WALT) COMPANY	None - $1,000	Dividends	None - $200	Gifted
	DU PONT E I DE NEMOURS & CO	$15,001 - $50,000	Dividends	$201 - $1,000	
	DUKE ENERGY CORP	$15,001 - $50,000	Dividends	$1,001 - $2,500	
	EXXON CORPORATION	$15,001 - $50,000	Dividends	$201 - $1,000	
	FIRST CHICAGO NBD CORP	$15,001 - $50,000	Dividends	$201 - $1,000	
	GTE CORPORATION	$15,001 - $50,000	Dividends	$201 - $1,000	
	GENERAL ELECTRIC CO.	$50,001 - $100,000	Dividends	$201 - $1,000	
	HEWLETT PACKARD CO.	None - $1,000	Dividends	None - $200	Gifted
	GENERAL SEMICONDUCTOR, INC.	$1,001 - $15,000	Dividends	None - $200	P
	GILBRATOR PACKAGING	None - $1,000	Dividends	None - $200	
	HIGHWOODS PROPERTIES	$1,001 - $15,000	Dividends	None - $200	P
	JOHNSON & JOHNSON, INC	$1,001 - $15,000	Dividends	None - $200	

SCHEDULE III -- ASSETS AND "UNEARNED" INCOME

	LOWES COMPANIES, INC.	None - $1,000	Dividends	None - $200	Gifted
	MICROSOFT CORP., PFD SER A	$15,001 - $50,000	Dividends	$201 - $1,000	
	MCDONALDS CORP.	None - $1,000	Dividends	None - $200	Gifted
	MINNESOTA MINING & MFG. CO.	$15,001 - $50,000	Dividends	$201 - $1,000	
	MOBIL CORPORATION	$15,001 - $50,000	Dividends	$201 - $1,000	
	NATIONSBANK CORP.	$15,001 - $50,000	Dividends	$201 - $1,000	
	NORFOLK SOUTHERN CORP.	$15,001 - $50,000	Dividends	$201 - $1,000	
	PHIZER, INC.	$15,001 - $50,000	Dividends	$201 - $1,000	
	OUTBOARD MARINE CORP.	None - $1,000	Dividends	None - $200	S
	PRENTISS PROPERTIES TRUST	$1,001 - $15,000	Dividends	$201 - $1,000	P
	PROCTOR & GAMBLE CO.	$15,001 - $50,000	Dividends	None - $200	
	ROYAL DUTCH PETROLEUM CO.	$15,001 - $50,000	Dividends	$1,001 - $2,500	
	SCHERING PLOUGH CORP.	$15,001 - $50,000	Dividends	$201 - $1,000	
	SEARS ROEBUCK & CO.	None - $1,000	Dividends	None - $200	Gifted
	SOUTHERN NATIONAL CORP. NC	None - $1,000	Dividends	None - $200	E
	SPIEKER PROPERTIES, INC.	$1,001 - $15,000	Dividends	$201 - $1,000	P
	TEXACO, INC.	$1,001 - $15,000	Dividends	$201 - $1,000	
	TEXTRON, INC.	$15,001 - $50,000	Dividends	$201 - $1,000	
	TIMKEN COMPANY	$1,001 - $15,000	Dividends	None - $200	P
	UNITED TECHNOLOGIES CORP.	$15,001 - $50,000	Dividends	$201 - $1,000	
	WACHOVIA CORPORATION	$15,001 - $50,000	Dividends	$201 - $1,000	
	WSMP, INC.	$1,001 - $15,000	Dividends	None - $200	
	THE WILLIAMS COMPANIES	$1,001 - $15,000	Dividends	None - $200	P
SP	JC BRADFORD & CO. BROKER ACCT				
SP	AT & T CORP	$15,001 - $50,000	Dividends	$201 - $1,000	

SCHEDULE III -- ASSETS AND "UNEARNED" INCOME

SP	AIRTOUCH COMMUNICATIONS	$1,001 - $15,000	Dividends	None - $200	
SP	AMERITECH CORP NEW	$15,001 - $50,000	Dividends	$201 - $1,000	
SP	AMERICAN GOVT INCOME	None - $1,000	Dividends	$201 - $1,000	S
SP	AMOCO CORPORATION	$15,001 - $50,000	Dividends	$1,001 - $2,500	
SP	ANHEUSER BUSCH CO	$100,001 - $250,000	Dividends	$2,501 - $5,000	
SP	BELL ATLANTIC CORP	$15,001 - $50,000	Dividends	$201 - $1,000	
SP	BELLSOUTH CORP	$15,001 - $50,000	Dividends	$201 - $1,000	
SP	CAROLINA FIRST BANCSHARES	$15,001 - $50,000	Dividends	None - $200	
SP	CORRECTIONS CORP OF AMERICA	$15,001 - $50,000	Dividends	None - $200	P
SP	EARTHGRAINS CO	$1,001 - $15,000	Dividends	None - $200	P
SP	FIRST SAVINGS BANCORP, INC	$1,001 - $15,000	Dividends	$201 - $1,000	
SP	GTE CORP	$50,001 - $100,000	Dividends	$2,501 - $5,000	
SP	GENERAL ELECTRIC CO	$1,001 - $15,000	Dividends	$201 - $1,000	
SP	LUCENT TECHNOLOGIES	$15,001 - $50,000	Dividends	None - $200	
SP	SBC COMMUNICATIONS, INC	$15,001 - $50,000	Dividends	$201 - $1,000	
SP	TRAVELERS GROUP, INC	$100,001 - $250,000	Dividends	$201 - $1,000	
SP	NYNEX CORP	None - $1,000	Dividends	$201 - $1,000	E
SP	PACIFIC TELESIS CORP	None - $1,000	Dividends	None - $200	E
SP	TAMBRANDS, INC	None - $1,000	Dividends	$201 - $1,000	E
SP	US WEST COMMUNICATIONS GROUP	$1,001 - $15,000	Dividends	$201 - $1,000	
SP	U S WEST MEDIA GROUP	$1,001 - $15,000	Dividends	None - $200	
SP	REPUBLIC INDUSTRIES, INC	None - $1,000	Dividends	None - $200	S
SP	TII INDUSTRIES, INC	None - $1,000	Dividends	None - $200	S
SP	NC MUNI PWR AGY	$1,001 - $15,000	Interest	$201 - $1,000	
SP	NC MUNI PWR AGY #1	$15,001 - $50,000	Interest	$1,001 - $2,500	
SP	NEWTON NC SAN SWR	$1,001 - $15,000	Interest	$201 - $1,000	

SCHEDULE III -- ASSETS AND "UNEARNED" INCOME

SP	CHARLOTTE-MECK HOSP AU	$15,001 - $50,000	Interest	$201 - $1,000	
SP	DEAN WHITTER BROKER ACCT				
SP	ALCATEL ALSTHOM SPON	$1,001 - $15,000	Dividends	None - $200	
SP	ARCHER DANIELS MIDLAND	$1,001 - $15,000	Dividends	None - $200	
SP	AT & T CORP.	None - $1,000	Dividends	None - $200	S
SP	BB & T CORP.	$1,001 - $15,000	Dividends	None - $200	E
SP	BANK OF GRANITE	$100,001 - $250,000	Dividends	$1,001 - $2,500	
SP	BRAZIL FUND	$1,001 - $15,000	Dividends	$1,001 - $2,500	
SP	CORNING, INC.	$15,001 - $50,000	Dividends	None - $200	P
SP	DIAMOND OFFSHORE DRILLING	$1,001 - $15,000	Dividends	None - $200	P
SP	GTE CORP	None - $1,000	Dividends	$201 - $1,000	S
SP	JEFFERSON PILOT CORP.	$15,001 - $50,000	Dividends	$201 - $1,000	
SP	LUCENT TECHNOLOGIES	None - $1,000	Dividends	None - $200	S
SP	MOTOROLA, INC.	$15,001 - $50,000	Dividends	None - $200	
SP	NATIONSBANK CORP.	$1,001 - $15,000	Dividends	$201 - $1,000	
SP	NCR CORPORATION	None - $1,000	Dividends	None - $200	NA spin off
SP	PEPSICO, INC. NC	$15,001 - $50,000	Dividends	$201 - $1,000	
SP	PIEDMONT NATURAL GAS	$15,001 - $50,000	Dividends	$201 - $1,000	
SP	SCHERING PLOUGH CORP.	$15,001 - $50,000	Dividends	$201 - $1,000	
SP	SOUTHERN NATIONAL CORP	None - $1,000	Dividends	None - $200	E
SP	TEXTRON, INC.	$15,001 - $50,000	Dividends	None - $200	P
SP	TIMKEN CO.	$1,001 - $15,000	Dividends	None - $200	P
SP	TRICON GLOBAL REST, INC.	$1,001 - $15,000	Dividends	None - $200	NA spin off
SP	WENDY'S INT'L	$15,001 - $50,000	Dividends	None - $200	P
SP	WILLIAMS CO.	$15,001 - $50,000	Dividends	None - $200	P

SCHEDULE III -- ASSETS AND "UNEARNED" INCOME

SP	WR GRACE & CO NEW DELA	$100,001 - $250,000	Dividends	$1,001 - $2,500	
SP	WSMP	$15,001 - $50,000	Dividends	None - $200	
SP	FRESNIUS MED CARE STOCK	None - $1,000	Dividends	None - $200	S
SP	FRESNIUS NAT MED CARE PFD	None - $1,000	Dividends	None - $200	S
SP	GT LATIN AMERICA GROWTH FUND	$15,001 - $50,000	Dividends	None - $200	P
SP	PHOENIX MIDCAP PFT CL A	$15,001 - $50,000	Dividends	None - $200	P
SP	DW LIQUID ASSET FUND	$100,001 - $250,000	Dividends	$5,001 - $15,000	
SP	GNMA POOL 8% BOND	$1,001 - $15,000	Interest	$201 - $1,000	
SP	US TREAS NOTE 9 125%	$1,001 - $15,000	Interest	$201 - $1,000	
SP	US TREAS NOTE 8 5%	$15,001 - $50,000	Interest	$1,001 - $2,500	
SP	UNIT GSIF GOVT US TSY #1	$1,001 - $15,000	Interest	$201 - $1,000	
SP	NC EASTN MUN PWR 4 5% BOND	$15,001 - $50,000	Interest	$1,001 - $2,500	
SP	NC MUN PWR AGY 1 4 2% BOND	$15,001 - $50,000	Interest	$1,001 - $2,500	
SP	CATAWBA CNTY NC HOSP 5 2% BOND	$1,001 - $15,000	Interest	$201 - $1,000	
SP	MANATEE CNTY WATER SEWER 6 1% BOND	$1,001 - $15,000	Interest	$201 - $1,000	
SP	FORSYTH CNTY NC LAW 4 75% BOND	$15,001 - $50,000	Interest	$201 - $1,000	
SP	MECKLENBURG CNTY 5 75% BOND	$50,001 - $100,000	Interest	None - $200	P
SP	MOORE CNTY NC GEN 4 75% BOND	$15,001 - $50,000	Interest	$201 - $1,000	
SP	CHARLOTTE NC GEN 5 5% BOND	$50,001 - $100,000	Interest	$2,501 - $5,000	
SP	NC MUN PWR AGY-1 4 1% BOND	$15,001 - $50,000	Interest	$201 - $1,000	
SP	FAYETTEVILLE NC PUB WKS 4 6% BOND	$15,001 - $50,000	Interest	$1,001 - $2,500	
SP	CABARRUS CNTY NC GEN 4 5% BOND	$15,001 - $50,000	Interest	$201 - $1,000	
SP	MANATEE CNTY FL WATER 9 3% BOND	$1,001 - $15,000	Interest	$201 - $1,000	
SP	DURHAM CNTY NC GEN 5 2% BOND	$50,001 - $100,000	Interest	$2,501 - $5,000	
SP	CHARLOTTE NC PUB IMPRV 5 3% BOND	$15,001 - $50,000	Interest	$1,001 - $2,500	
SP	MOUNT AIRY NC GEN 4.9% BOND	$15,001 - $50,000	Interest	$201 - $1,000	

SCHEDULE III -- ASSETS AND "UNEARNED" INCOME

SP	NC MED CARE COMM 5 5% BOND	$15,001 - $50,000	Interest	$1,001 - $2,500	
SP	HOMESTEAD EL WTR 5 6% BOND	None - $1,000	Interest	$201 - $1,000	S
SP	NC MUN PWR AGY 1 4 9% BOND	$15,001 - $50,000	Interest	$1,001 - $2,500	
SP	UNIT KEMPER TAX EX INCOME TRUST	$1,001 - $15,000	Interest	$201 - $1,000	
SP	UNIT NUVEEN MUNI NATL LT 108 SPS	$1,001 - $15,000	Interest	None - $200	
SP	UNIT NUVEEN MUNI NATL LT 183 QPS	None - $1,000	Interest	None - $200	
SP	WI ST HLTH FAC 7 3% BOND	None - $1,000	Interest	$201 - $1,000	S
	RAYMOND JAMES BROKER ACCT - CONT'D				
	CISCO SYSTEMS, INC	None - $1,000	Dividends	None - $200	
	COMPAQ COMPUTER CORP	None - $1,000	Dividends	None - $200	
	FURNITURE BRANDS INTL, INC	None - $1,000	Dividends	None - $200	
	GT GLOBAL LATIN AMERICA	None - $1,000	Dividends	None - $200	
	IMATION CORP	None - $1,000	Dividends	None - $200	
	RAYMOND JAMES IRA (BRANDES)	$100,001 - $250,000	NA	NA	
	RAYMOND JAMES IRA	$100,001 - $250,000	NA	NA	
	RAYMOND JAMES IRA	$100,001 - $250,000	NA	NA	
	FOLLOWING ITEMS HELD SEPARATELY:				
SP	GT GLOBAL LATIN AMERICA GRWOTH FD-A	$15,001 - $50,000	Dividends	None - $200	
SP	JC BRADFORD IRA	$50,001 - $100,000	NA	NA	
SP	OAK PLANTATION K-1 (LOSS)	None - $1,000	partnership - NA	None - $200	
	OAK PLANTATION K-1 (LOSS)	None - $1,000	partnership - NA	None - $200	
	AAI/FOREST HILLS	None - $1,000	partnership - NA	None - $200	
	AAI/FOUR SEASONS	None - $1,000	partnership - NA	None - $200	
	DYCO OIL & GAS 1992-1, 1983-1, 1981-2, 1984-1	None - $1,000	partnership - NA	None - $200	
SP	MCNEIL REAL ESTATE FD K-1	None - $1,000	partnership - NA	$201 - $1,000	

SCHEDULE III -- ASSETS AND "UNEARNED" INCOME

SP	MAJCO LIQUIDATING TRUST	None - $1,000	NA	$201 - $1,000	
	QUALIFIED PENSION IRA	None - $1,000	NA	NA	
	CONGRESSIONAL FED CREDIT UNION	$15,001 - $50,000	Interest	$201 - $1,000	
SP	BANK OF GRANITE	$15,001 - $50,000	Interest	$201 - $1,000	
	BANK OF GRANITE	$1,001 - $15,000	Interest	None - $200	
SP	NATIONSBANK	$1,001 - $15,000	Interest	$201 - $1,000	
	NATIONSBANK	$1,001 - $15,000	Interest	$201 - $1,000	
JT	JORDAN BRIDGE - LOAN	$1,001 - $15,000	Interest	$201 - $1,000	
JT	MARK WEAVER - LOAN	$1,001 - $15,000	Interest	$201 - $1,000	
	PLASTIC PACKAGING, INC	$1,000,001 - $5,000,000	Dividends	$50,001 - $100,000	
SP	PLASTIC PACKAGING, INC	$250,001 - $500,000	Dividends	$1,001 - $2,500	
	PLASTIC PACKAGING ESOP	$100,001 - $250,000	NA	NA	
	FPA PARAMOUNT FUND	$1,001 - $15,000	Dividends	$201 - $1,000	
	MEDTECH	None - $1,000	Dividends	None - $200	
	PRUTECH RESEARCH & DEV.	None - $1,000	partnership - NA	None - $200	S

SCHEDULE IV -- TRANSACTIONS

Report any purchase, sale, or exchange by you, your spouse, or dependent child during the reporting year of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child, or the purchase or sale of your personal residence, unless it is rented out. For further information, see Instructions, pages 20-21

SP,DC,JT	Asset	Type of Transaction	Date	Amount of Transaction
Example	Mega Corporation Common Stock	Purchase	10/12/94	$15,001 - $50,000
	TRAWEEK PROSPECT #1-H WELL	Purchase	12/97	$1,001 - $15,000
	HEINE PROSPECT #1-H WELL	Purchase	12/97	$1,001 - $15,000
	GREAT WESTERN WELCH '7777'	Sold	3/27/97	-0-
	ARMSTRONG WORLD INDUSTRIES	Purchase	8/26/97	$15,001 - $50,000
	COMMSCOPE, INC	Purchase	VARIOUS	$1,001 - $15,000
	GENERAL SEMICONDUCTOR, INC	Purchase	8/1/97	$1,001 - $15,000
	HIGHWOODS PROPERTIES	Purchase	8/26/97	$1,001 - $15,000
	OUTBOARD MARINE CORP.	Sold	9/17/97	$1,001 - $15,000
	PRENTISS PROPERTIES TRUST	Purchase	8/1/97	$1,001 - $15,000
	SPIEKER PROPERTIES, INC.	Purchase	8/26/97	$1,001 - $15,000
	TIMKEN COMPANY	Purchase	8/1/97	$1,001 - $15,000
	THE WILLIAMS COMPANIES	Purchase	10/7/97	$1,001 - $15,000
	CORNING, INC	Purchase	5/30/97	$1,001 - $15,000
SP	AMERICAN GOVT INCOME	Sold	11/12/97	$1,001 - $15,000
SP	CORRECTIONS CORP OF AMERICA	Purchase	11/12/97	$15,001 - $50,000
SP	EARTHGRAINS CO	Purchase	3/7/97	$1,001 - $15,000
SP	TAMBRANDS, INC	Exchange	7/22/97	$15,001 - $50,000
SP	REPUBLIC INDUSTRIES, INC.	Sold	11/12/97	$15,001 - $50,000
SP	TII INDUSTRIES, INC	Sold	11/12/97	$1,001 - $15,000
SP	AT & T CORP	Sold	2/10/97	$1,001 - $15,000
SP	CORNING, INC.	Purchase	VARIOUS	$15,001 - $50,000
SP	DIAMOND OFFSHORE DRILLING	Purchase	10/2/97	$15,001 - $50,000

SCHEDULE IV -- TRANSACTIONS

Report any purchase, sale, or exchange by you, your spouse, or dependent child during the reporting year of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child, or the purchase or sale of your personal residence, unless it is rented out. For further information, see Instructions, pages 20-21.

SP,DC,JT	Asset	Type of Transaction	Date	Amount of Transaction
	Example: Mega Corporation Common Stock	Purchase	10/12/94	$15,001 - $50,000
SP	GTE CORP	Sold	2/10/97	$15,001 - $50,000
SP	LUCENT TECHNOLOGIES	Sold	2/10/97	$1,001 - $15,000
SP	TEXTRON, INC	Purchase	11/20/97	$15,001 - $50,000
SP	TIMKEN CO.	Purchase	10/2/97	$15,001 - $50,000
SP	WENDY'S INTL	Purchase	5/8/97	$15,001 - $50,000
SP	WILLIAMS CO.	Purchase	10/16/97	$1,001 - $15,000
SP	FRESNIUS MED CARE STOCK	Sold	11/20/97	$15,001 - $50,000
SP	FRESNIUS NAT MED CARE PFD	Sold	11/20/97	$1,001 - $15,000
SP	GT LATIN AMERICA GROWTH RD	Purchase	12/17/97	$15,001 - $50,000
SP	PHOENIX MIDCAP PFT CL A	Purchase	12/22/97	$1,001 - $15,000
SP	MECKLENBURG CNTY 5.75% BOND	Purchase	11/17/97	$50,001 - $100,000
SP	HOMESTEAD EL WTR 5.6% BOND	Sold	10/1/97	$1,001 - $15,000
SP	WI ST HLTH FAC 7.3% BOND	Sold	11/5/97	$1,001 - $15,000
	AMERICAN STORES CO. NEW	Gifted	7/17/97	$15,001 - $50,000
	CROWN CORK & SEAL CO.	Gifted	7/17/97	$1,001 - $15,000
	WALT DISNEY COMPANY	Gifted	7/17/97	$1,001 - $15,000
	HEWLETT PACKARD CO.	Gifted	7/17/97	$1,001 - $15,000
	LOWES COMPANIES, INC.	Gifted	7/17/97	$15,001 - $50,000
	MCDONALDS CORP.	Gifted	7/17/97	$1,001 - $15,000
	SOUTHERN NATIONAL CORP.	Exchange	1/97	$1,001 - $15,000
SP	NYNEX CORP.	Exchange	6/97	$1,001 - $15,000
SP	PACIFIC TELESIS CORP.	Exchange	6/97	$1,001 - $15,000

SCHEDULE IV -- TRANSACTIONS

Report any purchase, sale, or exchange by you, your spouse, or dependent child during the reporting year of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child, or the purchase or sale of your personal residence, unless it is rented out. For further information, see Instructions, pages 20-21.

SP,DC,JT	Asset	Type of Transaction	Date	Amount of Transaction
	Example Mega Corporation Common Stock	Purchase	10/12/94	$15,001 - $50,000
	SEARS ROEBUCK & CO		7/17/97	$1,001 - $15,000
	CISCO SYSTEMS		7/17/97	$1,001 - $15,000
	COMPAQ COMPUTER CORP		7/17/97	$15,001 - $50,000
	FURNITURE BRANDS INTL, INC		7/17/97	$1,001 - $15,000
	GT GLOBAL LATIN AMERICAN GROWTH		7/17/97	$1,001 - $15,000
	IMATION CORP		7/17/97	$1,001 - $15,000
SP	BB & T CORP	Exchange	1/97	$1,001 - $15,000
	MEDTECH	Purchase	1/97	$1,001 - $15,000
	PRUTECH RESEARCH & DEV	Sold	1/97	-0-

SCHEDULE V -- LIABILITIES

Report liabilities of over $10,000 owed to any one creditor ***at any time*** during the reporting period by you, your spouse, or dependent child. Mark the highest amount owed during the year.
Exclude: Any mortgage on your personal residence (unless it is rented out), loans secured by automobiles, household furniture, or appliances, and liabilities owed to a spouse, or the child, parent, or sibling of you or your spouse. Report ***revolving charge accounts*** only if the balance at the end of the reporting period exceeded $10,000. For further information, see Instructions, pages 21-22.

SP,DC,JT	Creditor	Type of Liability	Amount of Liability
	Example First Bank of Wilmington, Delaware	Mortgage on 123 Main St., Dover, Del.	$100,001 - $250,000

SCHEDULE VI -- GIFTS

Report the source, a brief description, and the value of all gifts totalling more than $250 received by you, your spouse, or a dependent child from any source during the year

Exclude: Gifts from relatives, gifts of personal hospitality of an individual, local meals, and gifts to a spouse or dependent child that are totally independent of his or her relationship to you. Gifts with a value of $100 or less need not be added towards the $250 disclosure threshold

Note: The gift rule (House Rule 52 in the 104th Congress, renumbered as House Rule 51 of the 105th Congress) prohibits gifts except as specifically provided in the rule

For further information, see Instructions, pages 22-24

Source	Description	Value
Example Mr. Joseph H. Smith, Anytown, Anystate	Silver Platter (waiver received from Committee on Standards)	$270
		$

SCHEDULE VII -- TRAVEL PAYMENTS AND REIMBURSEMENTS

Identify the source and list travel itinerary, dates, and nature of expenses provided for travel and travel-related expenses totalling more than $250 received by you, your spouse, or a dependent child during the reporting period. Indicate whether a family member accompanied the traveler at the sponsor's expense, and the amount of time, if any, that was not at the sponsor's expense. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor.
Exclude: Travel-related expenses provided by federal, state and local governments, or by a foreign government required to be separately reported under the Foreign Gifts and Decorations Act (5 U.S.C. 7342); travel paid for by a Federal political committee; travel provided to a spouse or dependent child that is totally independent of his or her relationship to you. For further information, see Instructions, pages 24-26.

Source	Date(s)	Point of Departure--Destination--Point of Return	Lodging? (Y/N)	Food? (Y/N)	Was a Family Member Included? (Y/N)	Any time not at sponsor's expense
Examples Chicago Chamber of Commerce	Mar 2	Wash., D.C.-Chicago-Wash., D.C.	N	N	N	N
Mega Corporation	Aug 6-13	Wash., D.C.-Los Angeles-Cleveland	Y	Y	Y	4 Days
PLASTIC PACKAGING, INC	MARCH 7-10	WASH., D.C. - HICKORY, NC - WASH, D.C.	N	N	Y	N
PLASTIC PACKAGING, INC	JUNE 20-23	WASH., D.C. - HICKORY, NC - WASH., D.C.	N	N	Y	N
PLASTIC PACKAGING, INC	SEPT. 5-7	WASH., D.C. - HICKORY, NC - WASH., D.C.	N	N	Y	N

SCHEDULE VIII -- POSITIONS

Report all positions, compensated or uncompensated, held during the current calendar year as an officer, director, trustee of an organization, partner, proprietor, representative, employee, or consultant of any corporation, firm, partnership, or other business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States. For further information, see Instructions, page 26

Exclude: Positions held in any religious, social, fraternal, or political entities, positions solely of an honorary nature, and positions listed on Schedule I.

Position	Organization
CHAIRMAN OF THE BOARD	PLASTIC PACKAGING, INC.
LIMITED PARTNER	ASSOCIATED APARTMENT INVESTORS
LIMITED PARTNER	OAK PLANTATION ASSOCIATED, LTD.
LIMITED PARTNER	DYCO PETROLEUM

SCHEDULE IX -- AGREEMENTS

Identify the date, parties to, and general terms of any agreement or arrangement with respect to future employment, a leave of absence during the period of government service, continuation or deferral of payments by a former or current employer other than the U.S. Government, or continuing participation in an employee welfare or benefit plan maintained by a former employer. For further information, see Instructions, pages 26-27.

Date	Parties To	Terms of Agreement
	SEE ATTACHED LETTER	

CASS BALLENGER
10TH DISTRICT, NORTH CAROLINA
DEPUTY MAJORITY WHIP
REPUBLICAN STEERING COMMITTEE
COMMITTEE ON EDUCATION AND THE WORKFORCE
SUBCOMMITTEE ON WORKFORCE PROTECTIONS (CHAIRMAN)
EMPLOYER-EMPLOYEE RELATIONS
INTERNATIONAL RELATIONS COMMITTEE
SUBCOMMITTEE ON WESTERN HEMISPHERE
SUBCOMMITTEE ON INTERNATIONAL OPERATIONS AND HUMAN RIGHTS

Congress of the United States
House of Representatives
Washington, DC 20515–3310

2182 RAYBURN HOUSE OFFICE BUILDING
WASHINGTON, DC 20515–3310
202–225–2576
cass.ballenger@mail.house.gov
DISTRICT OFFICES
P.O. BOX 1830
361–10TH AVENUE DRIVE, NE
HICKORY, NC 28603
704–327–8100
1–800–477–2576 TOLL FREE
P.O. BOX 1881
2554 LEWISVILLE-CLEMMONS ROAD
SUITE 107
CLEMMONS, NC 27012
910–766–9455

January 15, 1998

The Honorable James V. Hansen
Chairman
Committee On Standards of Official Conduct
HT2 Capitol
Washington, D. C. 20515

Dear Mr. Chairman:

I am writing to request clarification on the rules governing outside earned income as it relates to a consulting fee I currently receive from my company (see attached letters and replies), as well as a new fringe benefit my company has agreed to offer to me.

As you can see from the attached letters, I have been permitted to receive $20,000 per year for as much as 400 hours of consulting services on implementation of corporate policy decisions. Plastic Packaging, Inc., a company I founded and in which I have controlling interest, is my prinicpal family investment, and I view it important to remain associated with the business to assure that my investment is protected. In previous reponses from the Committee, this annual amount has not been counted as outside earned income for the purposes of the limitation in Rule XLVII.

Now, in recognition of the services I provide to my company, it has agreed to sponsor a life insurance benefit for me. The life insurance benefit consists of life insurance on my life alone, and life insurance that matures upon the death of the survivor of myself and my wife, Donna. The life insurance benefit is structured under what is known as a Split-Dollar Plan.

The economic benefit that is represented by the life insurance under the Split-Dollar Plan will be reported as income for tax purposes. The value of the benefit for 1997 is approximately $9,500. Given the earlier determination by the Committee as it relates to the $20,000 consulting fee, may I accept the $9,500 without violating the outside earned income limitation of $20,040? I would appreciate advice relative to this matter for calendar year 1997 and beyond.

If you have questions or need clarification on any point, please call me or have your staff

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contact my Chief-of-Staff, Patrick Murphy, at 52576. Thank you for your prompt attention to this matter.

Sincerely,

Cass

CASS BALLENGER
Member of Congress

CB:pm

Enclosures (3)

JAMES V. HANSEN, UTAH
CHAIRMAN
LAMAR SMITH, TEXAS
JOEL HEFLEY, COLORADO
BOB GOODLATTE, VIRGINIA
JOE KNOLLENBERG, MICHIGAN

HOWARD L. BERMAN, CALIFORNIA
RANKING DEMOCRATIC MEMBER
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ED PASTOR, ARIZONA
CHAKA FATTAH, PENNSYLVANIA
ZOE LOFGREN, CALIFORNIA
SUITE HT-2, THE CAPITOL
(202) 225-7103

ONE HUNDRED FIFTH CONGRESS

U.S. House of Representatives

COMMITTEE ON STANDARDS OF
OFFICIAL CONDUCT
Washington, DC 20515–6328

February 20, 1998

FEB 25 1998

The Honorable Cass Ballenger
U.S. House of Representatives
2182 Rayburn House Office Building
Washington, DC 20515

Dear Colleague:

This responds to your letter of January 15, 1998 regarding your earned income from Plastic Packaging, Inc., a company that you founded and in which you have the controlling interest. In substance, the question posed in your letter is whether you may accept from the company, in addition a $20,000 per year consulting fee, a life insurance benefit that the company is sponsoring for you in recognition of your services to the company. Your letter states that the benefit is structured under a Split-Dollar Plan, the economic benefit of which is reported as income for tax purposes, and that the value of the benefit for 1997 is approximately $9,500.

As your letter recognizes, while the outside earned income of Members and senior staff is limited by both statute and House rule[1], clause 4(e) of House Rule 47 explicitly excepts a number of items from the definition of the term "outside earned income," and hence from the outside earned income limitation. One part thereof, clause 4(e)(4), provides an exception for income from a family business in the following circumstances:

> in the case of a Member, officer or employee engaged in a trade or business in which the individual or his family holds a controlling interest and in which both personal services and capital are income-producing factors, any amount received by such individual so long as the personal services actually rendered by the individual in the trade or business do not generate a significant amount of income.

Thus this provision excepts from the outside earned income limit amounts that a Member receives from a business where three requirements are satisfied: (1) the Member or his family holds a controlling interest in the business, (2) the nature of the business is such that both personal services and capital are income-producing factors, and (3) the personal services that the Member renders for the business are of a nature that they do not generate a significant amount of money. The intent of this provision, as reflected in the report of the House Commission on Administrative Review, was that,

---

[1] 5 U.S.C. app. 4 §501(a); House Rule 47, cl. 1(a).

> Members should be able to render personal services to manage or protect their equity in a family trade or business without having to allocate these personal services toward the 15-percent limitation.

H.Doc. 95-73, 95th Cong., 1st Sess. (Feb. 14, 1977).

In letters to you of February 25, 1987 and October 27, 1990, copies of which you attached to your current letter, the Committee determined the provision's requirements were satisfied with regard to Plastic Packaging and the consulting services (of up to 400 hours per year) that you render for the company, and that hence the $20,000 per year fee that you receive for those services would not be counted toward the outside earned income limit.[2] Both of those letters reflected the Committee's view that your limited efforts in behalf of the company appeared to be aimed at preserving your equity in the company, consistent with the intent of the provision, rather than generating income for the company.

The Committee understands from your current letter that you continue to have the controlling interest in Plastic Packaging. In view of the Committee's prior determinations regarding your consulting fee from the company, the economic benefit of the Split-Dollar Plan life insurance that the company is sponsoring for you, as described in your letter, likewise need not be counted as outside earned income for purposes of the outside earned income limit – provided, however, that there has been no significant change since 1990 in either the nature of the business of Plastic Packaging, or the nature or level of the services that you render for the company. If any such changes have occurred, you should contact the Committee for further advice. Otherwise, the economic benefit of the life insurance, like your consulting fee, should be reported on your annual Financial Disclosure Statement.

If you have any further questions, please contact the Committee's Office of Advice and Education at extension 5-3787.

Sincerely,

James V. Hansen
Chairman

Howard L. Berman
Ranking Democratic Member

[2] The Committee's letter of October 27, 1990 also reflected the Committee's determination that the consulting fee you receive from the company does not violate the "fiduciary relationship" provisions of the Ethics in Government Act and the House rules that took effect of January 1, 1991. 5 U.S.C. app. 4 §502(a); House Rule 47, cl. 2.

218 Cannon House Office Building
Washington, DC 20515
202-225-2576

COMMITTEES:
EDUCATION AND LABOR
PUBLIC WORKS AND TRANSPORTATION

Congress of the United States
House of Representatives
Washington, DC 20515

[illegible] Avenue Drive, N.
Hickory, NC 28601
704-327-8100

P.O. Box 876
418 South Street
Gastonia, NC 28053
704-864-8822

March 20, 1990

The Honorable Julian Dixon
Chairman
The Committee on Standards of
Official Conduct
HT-2, U.S. Capitol
Washington, D.C. 20515

Dear Julian:

I would appreciate clarification on limitations on outside earned income as it relates to a consulting fee I currently receive (see attached letter) from my company, in light of the changes mandated by the Ethics Reform Act of 1989 (Public Law 101-194).

As you can see from the attached letter, I have been permitted to receive $20,000 per year for as much as 400 hours of consulting services on implementation of corporate policy decisions. Plastic Packaging, Inc., a company I founded and in which I have controlling interest, is my principal family investment and I view it important to remain associated with the business to assure that my investment is protected.

Please advise me relative to any exemption of these fees from the limits on outside income for calendar year 1990 as prescribed under clause 2(b)(1) of House Rule XLVII as revised by Public Law 101-194. Further, I would appreciate advice relative to this matter for calendar year 1991 and beyond.

If you have questions or need clarification on any point, please call me or have your staff contact my administrative assistant, Patrick Murphy, at 225-2576.

Thank you for your prompt attention to this matter.

Sincerely,

Cass Ballenger

CASS BALLENGER
Member of Congress

CB:pmm

Enclosure

U.S. House of Representatives

COMMITTEE ON STANDARDS OF
OFFICIAL CONDUCT

Washington, DC 20515

February 25, 1987

The Honorable Cass Ballenger
United States House of Representatives
116 Cannon House Office Building
Washington, D. C. 20515

Dear Colleague:

This is in response to your letter of January 16, 1987, requesting the advice of this Committee regarding the propriety of your receipt of certain compensation from Plastic Packaging, Inc. Your correspondence elaborates on information provided in an earlier meeting with Committee Counsel Mark Davis.

You explain that you served as President of Plastic Packaging, Inc., from its founding in 1956 until your election to the House of Representatives. While you remain the majority stockholder and Chairman of the Board, you no longer have day-to-day operating responsibilities. In lieu of the salary previously paid to you, Plastic Packaging, Inc., intends to pay you $20,000 per year for as much as 400 hours of consulting services on implementation of corporate policy decisions. You further explain that Plastics Packaging, Inc., is your principal family investment, and you view it important to remain associated with the business to assure that your investment is protected.

The provision implicated by your inquiry is House Rule XLVII, which limits the amount of outside earned income which a Member of the House of Representatives may receive in a calendar year to 30 percent of the Member's aggregate yearly congressional salary. As provided in the Rule, the term "outside earned income" means "wages, salaries, professional fees, honorariums, and other amounts ... received as compensation for personal services actually rendered." Several exemptions are noted, however. Clause 3(d)(4) of Rules XLVII specifically states that outside earned income does not include--

> in the case of a Member engaged in a trade or business in which the Member or his family holds a controlling interest and in which both personal services and capital are income-producing factors, any amount received

by such Member so long as the personal services actually rendered by the Member in the trade or business do not generate a significant amount of income.

The Committee is of the opinion that the services you will be performing for Plastic Packaging, Inc., and compensation in the amount specified, fall within the stated exemption. The purpose of the exemption, as stated by the Commission on Administrative Review of the 95th Congress, is to enable Members to protect their interest in a family business. (See, House Document 95-73, p. 11; see also, Advisory Opinion No. 13, House Select Committee on Ethics, 95th Congress.) Further evidence of the fact that your efforts are aimed at preserving your equity, rather than generating a significant amount of income, is the limited time you plan to devote to the business. The Committee also notes that the amount of compensation you will be receiving from the corporation is substantially less than that reported for prior years on the Financial Disclosure Statement which you filed as a candidate.

While this compensation will not be counted as outside earned income for the purposes of the limitation in Rule XLVII, please note that it still must be reported on the Financial Disclosure Statement you are required to file as a Member of the House of Representatives by May 15th of each year. For purposes of clarity, we suggest that you note on the Statement that this income is from a family business and exempt from application of Rule XLVII.

If you have any further questions concerning this matter, please contact the Committee staff at extension 5-7103.

Sincerely,

Julian C. Dixon
Chairman

Lloyd D. Spence
Ranking Minority Member

JS:MJD

JULIAN C. DIXON, CALIFORNIA, CHAIRMAN
VIC FAZIO, CALIFORNIA
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CHESTER G. ATKINS, MASSACHUSETTS
(202) 225-7103

CHARLES PASHAYAN, JR., CALIFORNIA
THOMAS L. PETRI, WISCONSIN
LARRY L. CRAIG, IDAHO
FRED GRANDY, IOWA
RALPH L. LOTHIAN, CHIEF COUNSEL

U.S. House of Representatives
Committee on Standards of Official Conduct
Suite HT-2, U.S. Capitol
Washington, DC 20515

October 27, 1990

The Honorable Cass Ballenger
U.S. House of Representatives
218 Cannon House Office Building
Washington, D. C. 20515

Dear Colleague:

This is in response to your letter requesting clarification of the limitations on outside earned income as it relates to a consulting fee you receive from your company. The Committee originally addressed this matter in a letter of February 25, 1987, a copy of which you enclosed with your correspondence.

You explain that while a Member of the House you have accepted $20,000 per year from Plastic Packaging, Inc., for as much as 400 hours of consulting services on implementation of corporate policy decisions. You founded the company and have retained controlling interest in it. It is your principal family investment and you continue to view it important to remain associated with the business to assure that your investment is protected. Consistent with Committee advice, this income has not been treated as subject to the earned income limit of House Rule XLVII. In light of the changes mandated by the Ethics Reform Act of 1989 (P.L. 101-194 as amended by P.L. 101-280), you ask if the Committee's earlier advice continues to apply to your situation.

In 1987, you told the Committee that you were Chairman of the Board of Plastic Packaging, Inc., in addition to being majority stockholder. Your Administrative Assistant, Patrick Murphy, has informed Committee Counsel Mark Davis that this continues to be the case. While the corporation does provide you with transportation to attend board meetings, you receive no compensation other than the $20,000 consulting fee.

Several provisions of Federal law and House rules, as amended by the Ethics Reform Act of 1989, are relevant to your inquiry. Members of the House are limited in the amount of outside earned income they may receive in a calendar year by House Rule XLVII. For calendar year 1990, the outside earned income limit is 30 percent of the aggregate yearly congressional salary paid in 1989, or $26,850. House Rule XLVII, clause 1(b)(1). For calendar years after 1991, the earned income limit

will be 15 percent of the January 1 rate of pay in effect for level II of the Executive Schedule (the same rate at which House Members are paid). House Rule XLVII, clause 1(a)(2); see also section 501(a) of the Ethics in Government Act of 1978, as amended (5 U.S.C. app. 7, §501(a), hereinafter cited as "EIGA".

"Outside earned income" is defined in Rule XLVII, clause 3(e), to mean "wages, salaries, fees, and other amounts received or to be received as compensation for personal services actually rendered." Several exemptions are noted, however. Clause 3(e)(4) of Rule XLVII specifically states that outside earned income does not include--

> [I]n the case of a Member engaged in a trade or business in which the Member or his family holds a controlling interest and in which both personal services and capital are income-producing factors, any amount received by such Member so long as the personal services actually rendered by the Member in the trade or business do not generate a significant amount of income.

Even if compensation is consistent with the definition of "outside earned income" or falls within one of the stated exemptions, certain activities for compensation will be totally prohibited by Federal law and House Rule XLVII beginning January 1, 1991. Section 502 of EIGA (5 U.S.C. app. 7, §502), provides, in pertinent part, that Members of the House, as well as other senior government officials, shall not --

> (1) receive compensation for affiliating with or being employed by a firm, partnership, association, corporation, or other entity which provides professional services involving a fiduciary relationship;
>
> (2) permit that Member's . . . name to be used by any such firm, partnership association, corporation, or other entity;
>
> (3) receive compensation for practicing a profession which involves a fiduciary relationship; [or]
>
> (4) serve for compensation as an officer or member of the board of any association, corporation, or other entity.

See also House Rule XLVII, clause 2.

The statute does not define what constitutes "professional services which involve a fiduciary relationship." That determination has been left to this Committee with respect to House Members and staff, pursuant to its authority under sections 503(1)(A) and 504(b) of EIGA (5 U.S.C. app. 7, §§503(a)(A) and 504(b)). See Report of the House Bipartisan Task Force on Ethics on H.R. 3660, p. 16, Cong. Rec. (daily ed.), Nov. 21, 1989, E9257.

The legislative history of the Ethics Reform Act suggests the primary objectives behind enactment of the prohibition on the paid practice of a profession which involve a fiduciary relationship. The first was to prevent any conflict between the responsibility of a public official to act for the common good and the obligation which would be owed a private client paying compensation. The second was to make certain that official position was not being used for private gain. The third objective was to "ensure that honoraria not reemerge in various kinds of professional fees from outside interests." See Task Force Report, supra, pp. 15-16.

To determine whether employment in which a Member proposes to engage is prohibited under the statute, the Committee is looking at more than the title of the position and the kind of services typically performed by those in the occupation. Subject to further legislative guidance, the Committee is evaluating the nature and circumstances of each individual's particular employment on a case-by-case basis in light of the objectives of the Ethics Reform Act.

With respect to your services for Plastic Packaging, Inc., you are serving as Chairman of the Board but are receiving no compensation other than the consulting fee. (Your receipt of travel expenses to attend board meetings is not considered compensation.) You were paid by Plastic Packaging prior to your election to the House of Representatives, but the $20,000 consulting fee is significantly less than you had been receiving. In addition, the payment is consistent with the policy enunciated in House Rule XLVII to permit a Member to accept compensation to protect his interest in a family business. Your limited efforts appear aimed at preserving your equity, rather than generating income for the company. Such continuing service related to a family-controlled business suggests neither a significant conflict between public and private obligations, nor accrual of a benefit on account of your status as a Member of Congress. Furthermore, payments to you are not in consideration of speeches, appearances, or articles.

Based on the above considerations, we are of the opinion that the services you perform for Plastic Packaging, Inc., and the specified compensation you receive, continue to fall within the cited exemption in House Rule XLVII. Furthermore, your

receipt of this compensation will not be prohibited after January 1, 1991, since we do not view you as performing "professional services involving a fiduciary relationship" for the purposes of section 502 of EIGA and House Rule XLVII.

While this compensation will not be counted as outside earned income for the purposes of the limitation in Rule XLVII, please note that it still must be reported on the Financial Disclosure Statement you are required to file as a Member of the House of Representatives by May 15th of each year.

As stated above, this opinion is subject to reconsideration based on subsequent enactment of legislation or rule changes. If you have any further questions concerning this matter, please contact the Committee's Office of Advice and Education at extension 5-3787.

Sincerely,

Julian C. Dixon
Chairman

John T. Myers
Ranking Minority Member

JS:MJD

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1997

Form A
For use by Members, officers, and employees

98 JUN 11 PM 2:04

HAND DELIVERED

MC

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(Office Use Only)

THOMAS CASS BALLENGER
(Full Name)

867 20TH AVENUE DRIVE, NW
(Mailing Address)

HICKORY NC 28601
Daytime Telephone (202) 225-2576

Filer Status	[X]	Member of the U S House of Representatives	State NC District 10	[ ]	Officer or Employee	Employing Office
Report Type	[X]	Annual (May 15)	[ ] Amendment		[ ] Termination	Termination Date

A $200 penalty shall be assessed against anyone who files more than 30 days late.

PRELIMINARY INFORMATION -- ANSWER EACH OF THESE QUESTIONS

I Did you or your spouse have "earned" income (e g , salaries or fees) of $200 or more from any source in the reporting period?
If yes, complete and attach Schedule I. Yes [X] No [ ]

II Did any individual or organization make a donation to charity in lieu of paying you for a speech, apppearance, or article in the reporting period?
If yes, complete and attach Schedule II. Yes [X] No [ ]

III Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period?
If yes, complete and attach Schedule III. Yes [X] No [ ]

IV Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset worth more than $1,000 in the reporting period?
If yes, complete and attach Schedule IV. Yes [X] No [ ]

V Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period?
If yes, complete and attach Schedule V. Yes [ ] No [X]

VI Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i e , aggregating more than $250 and not otherwise exempt)?
If yes, complete and attach Schedule VI. Yes [ ] No [X]

VII. Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $250 from one source)?
If yes, complete and attach Schedule VII. Yes [X] No [ ]

VIII. Did you hold any reportable positions on or before the date of filing in the current calendar year?
If yes, complete and attach Schedule VIII. Yes [X] No [ ]

IX Did you have any reportable agreement or arrangement with an outside entity?
If yes, complete and attach Schedule IX. Yes [X] No [ ]

Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION -- ANSWER EACH OF THESE QUESTIONS

TRUSTS- Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child? (See Instructions, pages 10-11.) Yes [ ] No [X]

EXEMPTION Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption? (See Instructions, page 11) Yes [ ] No [X]

CERTIFICATION -- THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct or its designee Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil penalties and criminal sanctions (See 5 U S C app 4, 104 and 18 U.S.C 1001)

SIGNATURE OF REPORTING INDIVIDUAL T. Cass Ballenger

DATE (Month/Day/Year) 6/11/98

SCHEDULE I -- EARNED INCOME

List the source, type, and amount of earned income from any source (other than the filer's current employment by the U.S. Government) totalling $200 or more during the preceding calendar year. For a spouse, list the source and amount of any honoraria; list only the source for other spouse earned income exceeding $1,000. For further information, see Instructions, pages 12-13

	Source	Type	Amount
Examples	Keene State	Approved Teaching Fee	$10,000
	State of Maryland	Legislative Pension	$9,000
	Civil War Roundtable (Oct 2nd)	Spouse Speech	$1,000
	Ontario County Board of Education	Spouse Salary	NA
	PLASTIC PACKAGING, INC. - FAMILY BUSINESS	SALARY EXEMPT FROM RULE XLVII	20000
	PLASTIC PACKAGING, INC.	SPOUSE SALARY	N/A
	LEGISLATIVE RETIREMENT SYSTEM OF NC	PENSION	4166

For payments to charity in lieu of honoraria, use Schedule II.

SCHEDULE II -- PAYMENTS IN LIEU OF HONORARIA MADE TO CHARITY

List the source, activity (i e , speech, appearance, or article), date, and amount of any payment made by the sponsor of an event to a charitable organization in lieu of an honorarium
A separate confidential list of charities receiving such payments must be filed directly with the Committe on Standards of Official Conduct. An envelope for transmitting the list is included in each Member's filing package. For further information, see Instructions, pages 13-14

Source		Activity	Date	Amount
Examples	Association of American Associations, Wash , D C	Speech	Feb. 2, 1994	$2,000
	XYZ Magazine	Article	Aug. 13, 1994	$500
R J. REYNOLDS EXECUTIVES, WASH , D C		SPEECH	2/11/97	$ 2,000
TOBACCO INSTITUTE, WASH , D C.		SPEECH	4/15/97	$ 2,000
AMERICAN RENTAL ASSOCIATION, ARLINGTON, VA		SPEECH	4/29/97	$ 500

SCHEDULE III -- ASSETS AND "UNEARNED" INCOME

BLOCK A **Asset and/or Income Source** Identify (a) each asset held for investment or production of income with a fair market value exceeding $1,000 at the end of the reporting year, and (b) any other asset or source of income which generated more than $200 in "unearned" income during the year. For rental property or land, provide an address. Provide full names of any mutual funds. For an IRA or retirement plan that is *self-directed*, list the underlying assets worth more than $1,000. For an IRA or retirement plan that is *not* self-directed, name the institution holding the account. **Exclude**: Your personal residence(s) (unless there is rental income), any debt owed to you by your spouse, or by your or your spouse's child, parent, or sibling, any deposits totalling $5,000 or less in personal savings accounts, any financial interests in or income derived from U.S. Government retirement programs. If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC) or is jointly held (JT), in the optional column on the far left. For further information, see Instructions, pages 14-20	BLOCK B **Value of Asset** at close of reporting year If you use a valuation method other than fair market value, please specify the method used. If an asset was sold and is included only because it generated income, the value should be "None."	BLOCK C **Type of Income** If other than one of the listed categories, specify the type of income by writing a brief description in this block Rent % = Royalty Income	BLOCK D **Amount of Income** For IRA's and retirement plans that are *not* self-directed, you may write in "NA" for income.	BLOCK E **Transaction** Indicate if asset was purchased(P), sold(S), or exchanged(E) in reporting year
SP DC *Examples* JT	SP Mega Corp. Stock SP 123 Main St., Dover, Del 1st Bank of Paducah, KY accounts	$15,001 - $50,000 $250,001 - $500,000 $50,001 - $100,000	Dividends Rent Interest	$201 - $1,000 $1,001 - $2,500 $5,001 - $15,000	P
JT	RENTAL HOUSE, 12TH AVENUE	$50,001 - $100,000	Rent	$2,501 - $5,000	
JT	RENTAL HOUSE, YORKLAND RD	$50,001 - $100,000	Rent	$5,001 - $15,000	
JT	WASHINGTON APT., 450 JERSEY AVE	$250,001 - $500,000	Rent	$5,001 - $15,000	
	GLENDALE PROSPECT #1-H WELL	$1,001 - $15,000	Rent - %	$201 - $1,000	
	NORTON/TAYLOR	$1,001 - $15,000	Rent - %	$1,001 - $2,500	
	KATHY KAY #1-H WELL	$1,001 - $15,000	Rent - %	$201 - $1,000	
	TRAWEEK PROSPECT #1-H WELL	$1,001 - $15,000	Rent - %	None - $200	P
	HEINE PROSPECT #1-H WELL	$1,001 - $15,000	Rent - %	None - $200	P
	GREAT WESTERN WELCH '7777'	None - $1,000	Rent - %	None - $200	S

SCHEDULE III -- ASSETS AND "UNEARNED" INCOME

	TROUSDALE #1	$1,001 - $15,000	Rent - %	$201 - $1,000	
	RAYMOND JAMES & ASSOC BROKER ACCT				
	HERITAGE CASH TRUST MONEY MRKT FUND	$1,001 - $15,000	Dividends	$1,001 - $2,500	
	AIR PRODUCTS & CHEMICALS, INC	$1,001 - $15,000	Dividends	None - $200	
	THE ALLSTATE CORPORATION	$1,001 - $15,000	Dividends	None - $200	
	ALCATEL ALSTHOM AMERICAN	$15,001 - $50,000	Dividends	$201 - $1,000	
	AMERICAN STORES CO NEW	None - $1,000	Dividends	None - $200	Gifted
	ARMSTRONG WORLD INDUSTRIES	$15,001 - $50,000	Dividends	None - $200	P
	BB & T CORPORATION	$15,001 - $50,000	Dividends	None - $200	Spin off - Southern National
	BANC ONE CORPORATION	$15,001 - $50,000	Dividends	$201 - $1,000	
	CPC INTERNATIONAL	$15,001 - $50,000	Dividends	$201 - $1,000	
	COMMSCOPE, INC	$1,001 - $15,000	Dividends	None - $200	Spin off - GENERAL INSTRU.
	CORNING, INC	$1,001 - $15,000	Dividends	None - $200	P
	CROWN CORK & SEAL CO	None - $1,000	Dividends	None - $200	Gifted
	DISNEY (WALT) COMPANY	None - $1,000	Dividends	None - $200	Gifted
	DU PONT E I DE NEMOURS & CO	$15,001 - $50,000	Dividends	$201 - $1,000	
	DUKE ENERGY CORP	$15,001 - $50,000	Dividends	$1,001 - $2,500	
	EXXON CORPORATION	$15,001 - $50,000	Dividends	$201 - $1,000	
	FIRST CHICAGO NBD CORP	$15,001 - $50,000	Dividends	$201 - $1,000	
	GTE CORPORATION	$15,001 - $50,000	Dividends	$201 - $1,000	
	GENERAL ELECTRIC CO	$50,001 - $100,000	Dividends	$201 - $1,000	
	HEWLETT PACKARD CO	None - $1,000	Dividends	None - $200	Gifted
	GENERAL SEMICONDUCTOR, INC	$1,001 - $15,000	Dividends	None - $200	Spin off - GENERAL INSTR.
	GILBRATOR PACKAGING	None - $1,000	Dividends	None - $200	
	HIGHWOODS PROPERTIES	$1,001 - $15,000	Dividends	None - $200	P
	JOHNSON & JOHNSON, INC	$1,001 - $15,000	Dividends	None - $200	

SCHEDULE III -- ASSETS AND "UNEARNED" INCOME

	LOWES COMPANIES, INC	None - $1,000	Dividends	None - $200	Gifted
	MICROSOFT CORP , PFD SER A	$15,001 - $50,000	Dividends	$201 - $1,000	
	MCDONALDS CORP	None - $1,000	Dividends	None - $200	Gifted
	MINNESOTA MINING & MFG CO	$15,001 - $50,000	Dividends	$201 - $1,000	
	MOBIL CORPORATION	$15,001 - $50,000	Dividends	$201 - $1,000	
	NATIONSBANK CORP	$15,001 - $50,000	Dividends	$201 - $1,000	
	NORFOLK SOUTHERN CORP	$15,001 - $50,000	Dividends	$201 - $1,000	
	PHIZER, INC	$15,001 - $50,000	Dividends	$201 - $1,000	
	OUTBOARD MARINE CORP	None - $1,000	Dividends	None - $200	S
	PRENTISS PROPERTIES TRUST	$1,001 - $15,000	Dividends	$201 - $1,000	P
	PROCTOR & GAMBLE CO	$15,001 - $50,000	Dividends	None - $200	
	ROYAL DUTCH PETROLEUM CO	$15,001 - $50,000	Dividends	$1,001 - $2,500	
	SCHERING PLOUGH CORP	$15,001 - $50,000	Dividends	$201 - $1,000	
	SEARS ROEBUCK & CO	None - $1,000	Dividends	None - $200	Gifted
	SOUTHERN NATIONAL CORP NC	None - $1,000	Dividends	None - $200	spin off - BB+T 8
	SPIEKER PROPERTIES, INC	$1,001 - $15,000	Dividends	$201 - $1,000	P
	TEXACO, INC	$1,001 - $15,000	Dividends	$201 - $1,000	
	TEXTRON, INC	$15,001 - $50,000	Dividends	$201 - $1,000	
	TIMKEN COMPANY	$1,001 - $15,000	Dividends	None - $200	P
	UNITED TECHNOLOGIES CORP	$15,001 - $50,000	Dividends	$201 - $1,000	
	WACHOVIA CORPORATION	$15,001 - $50,000	Dividends	$201 - $1,000	
	WSMP, INC	$1,001 - $15,000	Dividends	None - $200	
	THE WILLIAMS COMPANIES	$1,001 - $15,000	Dividends	None - $200	P
SP	JC BRADFORD & CO BROKER ACCT				
SP	AT & T CORP	$15,001 - $50,000	Dividends	$201 - $1,000	

SCHEDULE III -- ASSETS AND "UNEARNED" INCOME

SP	AIRTOUCH COMMUNICATIONS	$1,001 - $15,000	Dividends	None - $200	
SP	AMERITECH CORP. NEW	$15,001 - $50,000	Dividends	$201 - $1,000	
SP	AMERICAN GOVT INCOME	None - $1,000	Dividends	$201 - $1,000	S
SP	AMOCO CORPORATION	$15,001 - $50,000	Dividends	$1,001 - $2,500	
SP	ANHEUSER BUSCH CO	$100,001 - $250,000	Dividends	$2,501 - $5,000	
SP	BELL ATLANTIC CORP	$15,001 - $50,000	Dividends	$201 - $1,000	
SP	BELLSOUTH CORP	$15,001 - $50,000	Dividends	$201 - $1,000	
SP	CAROLINA FIRST BANCSHARES	$15,001 - $50,000	Dividends	None - $200	
SP	CORRECTIONS CORP OF AMERICA	$15,001 - $50,000	Dividends	None - $200	P
SP	EARTHGRAINS CO	$1,001 - $15,000	Dividends	None - $200	P
SP	FIRST SAVINGS BANCORP, INC	$1,001 - $15,000	Dividends	$201 - $1,000	
SP	GTE CORP	$50,001 - $100,000	Dividends	$2,501 - $5,000	
SP	GENERAL ELECTRIC CO	$1,001 - $15,000	Dividends	$201 - $1,000	
SP	LUCENT TECHNOLOGIES	$15,001 - $50,000	Dividends	None - $200	
SP	SBC COMMUNICATIONS, INC	$15,001 - $50,000	Dividends	$201 - $1,000	
SP	TRAVELERS GROUP, INC	$100,001 - $250,000	Dividends	$201 - $1,000	
SP	NYNEX CORP	None - $1,000	Dividends	$201 - $1,000	E
SP	PACIFIC TELESIS CORP	None - $1,000	Dividends	None - $200	E
SP	TAMBRANDS, INC	None - $1,000	Dividends	$201 - $1,000	E
SP	US WEST COMMUNICATIONS GROUP	$1,001 - $15,000	Dividends	$201 - $1,000	
SP	U S WEST MEDIA GROUP	$1,001 - $15,000	Dividends	None - $200	
SP	REPUBLIC INDUSTRIES, INC	None - $1,000	Dividends	None - $200	S
SP	TII INDUSTRIES, INC	None - $1,000	Dividends	None - $200	S
SP	NC MUNI PWR AGY	$1,001 - $15,000	Interest	$201 - $1,000	
SP	NC MUNI PWR AGY #1	$15,001 - $50,000	Interest	$1,001 - $2,500	
SP	NEWTON NC SAN SWR	$1,001 - $15,000	Interest	$201 - $1,000	

SCHEDULE III -- ASSETS AND "UNEARNED" INCOME

SP	CHARLOTTE-MECK HOSP AU	$15,001 - $50,000	Interest	$201 - $1,000	
SP	DEAN WHITTER BROKER ACCT				
SP	ALCATEL ALSTHOM SPON	$1,001 - $15,000	Dividends	None - $200	
SP	ARCHER DANIELS MIDLAND	$1,001 - $15,000	Dividends	None - $200	
SP	AT & T CORP.	None - $1,000	Dividends	None - $200	S
SP	BB & T CORP	$1,001 - $15,000	Dividends	None - $200	spin off - So. Nat'l B
SP	BANK OF GRANITE	$100,001 - $250,000	Dividends	$1,001 - $2,500	
SP	BRAZIL FUND	$1,001 - $15,000	Dividends	$1,001 - $2,500	
SP	CORNING, INC	$15,001 - $50,000	Dividends	None - $200	P
SP	DIAMOND OFFSHORE DRILLING	$1,001 - $15,000	Dividends	None - $200	P
SP	GTE CORP	None - $1,000	Dividends	$201 - $1,000	S
SP	JEFFERSON PILOT CORP	$15,001 - $50,000	Dividends	$201 - $1,000	
SP	LUCENT TECHNOLOGIES	None - $1,000	Dividends	None - $200	S
SP	MOTOROLA, INC	$15,001 - $50,000	Dividends	None - $200	
SP	NATIONSBANK CORP	$1,001 - $15,000	Dividends	$201 - $1,000	
SP	NCR CORPORATION	None - $1,000	Dividends	None - $200	spin off - AT+T NA
SP	PEPSICO, INC. NC	$15,001 - $50,000	Dividends	$201 - $1,000	
SP	PIEDMONT NATURAL GAS	$15,001 - $50,000	Dividends	$201 - $1,000	
SP	SCHERING PLOUGH CORP	$15,001 - $50,000	Dividends	$201 - $1,000	
SP	SOUTHERN NATIONAL CORP	None - $1,000	Dividends	None - $200	spin off - BB+T B
SP	TEXTRON, INC.	$15,001 - $50,000	Dividends	None - $200	P
SP	TIMKEN CO	$1,001 - $15,000	Dividends	None - $200	P
SP	TRICON GLOBAL REST, INC	$1,001 - $15,000	Dividends	None - $200	spin off - Pepsico NA
SP	WENDY'S INT'L	$15,001 - $50,000	Dividends	None - $200	P
SP	WILLIAMS CO	$15,001 - $50,000	Dividends	None - $200	P

SCHEDULE III -- ASSETS AND "UNEARNED" INCOME

SP	WR GRACE & CO NEW DELA	$100,001 - $250,000	Dividends	$1,001 - $2,500	
SP	WSMP	$15,001 - $50,000	Dividends	None - $200	
SP	FRESNIUS MED CARE STOCK	None - $1,000	Dividends	None - $200	S
SP	FRESNIUS NAT MED CARE PFD	None - $1,000	Dividends	None - $200	S
SP	GT LATIN AMERICA GROWTH FUND	$15,001 - $50,000	Dividends	None - $200	P
SP	PHOENIX MIDCAP PFT CL A	$15,001 - $50,000	Dividends	None - $200	P
SP	DW LIQUID ASSET FUND	$100,001 - $250,000	Dividends	$5,001 - $15,000	
SP	GNMA POOL 8% BOND	$1,001 - $15,000	Interest	$201 - $1,000	
SP	US TREAS NOTE 9 125%	$1,001 - $15,000	Interest	$201 - $1,000	
SP	US TREAS NOTE 8 5%	$15,001 - $50,000	Interest	$1,001 - $2,500	
SP	UNIT GSIF GOVT US TSY #1	$1,001 - $15,000	Interest	$201 - $1,000	
SP	NC EASTN MUN PWR 4 5% BOND	$15,001 - $50,000	Interest	$1,001 - $2,500	
SP	NC MUN PWR AGY 1 4 2% BOND	$15,001 - $50,000	Interest	$1,001 - $2,500	
SP	CATAWBA CNTY NC HOSP 5 2% BOND	$1,001 - $15,000	Interest	$201 - $1,000	
SP	MANATEE CNTY WATER SEWER 6 1% BOND	$1,001 - $15,000	Interest	$201 - $1,000	
SP	FORSYTH CNTY NC LAW 4 75% BOND	$15,001 - $50,000	Interest	$201 - $1,000	
SP	MECKLENBURG CNTY 5 75% BOND	$50,001 - $100,000	Interest	None - $200	P
SP	MOORE CNTY NC GEN 4 75% BOND	$15,001 - $50,000	Interest	$201 - $1,000	
SP	CHARLOTTE NC GEN 5 5% BOND	$50,001 - $100,000	Interest	$2,501 - $5,000	
SP	NC MUN PWR AGY-1 4 1% BOND	$15,001 - $50,000	Interest	$201 - $1,000	
SP	FAYETTEVILLE NC PUB WKS 4 6% BOND	$15,001 - $50,000	Interest	$1,001 - $2,500	
SP	CABARRUS CNTY NC GEN 4 5% BOND	$15,001 - $50,000	Interest	$201 - $1,000	
SP	MANATEE CNTY FL WATER 9 3% BOND	$1,001 - $15,000	Interest	$201 - $1,000	
SP	DURHAM CNTY NC GEN 5 2% BOND	$50,001 - $100,000	Interest	$2,501 - $5,000	
SP	CHARLOTTE NC PUB IMPRV 5 3% BOND	$15,001 - $50,000	Interest	$1,001 - $2,500	
SP	MOUNT AIRY NC GEN 4 9% BOND	$15,001 - $50,000	Interest	$201 - $1,000	

SCHEDULE III -- ASSETS AND "UNEARNED" INCOME

SP	NC MED CARE COMM 5 5% BOND	$15,001 - $50,000	Interest	$1,001 - $2,500	
SP	HOMESTEAD EL WTR 5 6% BOND	None - $1,000	Interest	$201 - $1,000	S
SP	NC MUN PWR AGY 1 4 9% BOND	$15,001 - $50,000	Interest	$1,001 - $2,500	
SP	UNIT KEMPER TAX EX INCOME TRUST	$1,001 - $15,000	Interest	$201 - $1,000	
SP	UNIT NUVEEN MUNI NATL LT 108 SPS	$1,001 - $15,000	Interest	None - $200	
SP	UNIT NUVEEN MUNI NATL LT 183 QPS	None - $1,000	Interest	None - $200	
SP	WI ST HLTH FAC 7 3% BOND	None - $1,000	Interest	$201 - $1,000	S
	RAYMOND JAMES BROKER ACCT - CONT'D				
	CISCO SYSTEMS, INC.	None - $1,000	Dividends	None - $200	Gifted
	COMPAQ COMPUTER CORP	None - $1,000	Dividends	None - $200	P/ Gifted
	FURNITURE BRANDS INTL, INC	None - $1,000	Dividends	None - $200	Gifted
	GT GLOBAL LATIN AMERICA	None - $1,000	Dividends	None - $200	Gifted
	IMATION CORP	None - $1,000	Dividends	None - $200	Gifted
	RAYMOND JAMES IRA (BRANDES)	$100,001 - $250,000	N/A	NA	Transferred from other IRA's
	RAYMOND JAMES IRA	$100,001 - $250,000	N/A	NA	Transferred from other IRA's
	RAYMOND JAMES IRA	$100,001 - $250,000	N/A	NA	Transferred from other IRA's
	FOLLOWING ITEMS HELD SEPARATELY				
SP	GT GLOBAL LATIN AMERICA GRWOTH FD-A	$15,001 - $50,000	Dividends	None - $200	
SP	JC BRADFORD IRA	$50,001 - $100,000	N/A	NA	
SP	OAK PLANTATION K-1 (LOSS)	None - $1,000	partnership - N/A	None - $200	
	OAK PLANTATION K-1 (LOSS)	None - $1,000	partnership - N/A	None - $200	
	AAI/FOREST HILLS	None - $1,000	partnership - N/A	None - $200	
	AAI/FOUR SEASONS	None - $1,000	partnership - N/A	None - $200	
	DYCO OIL & GAS 1992-1, 1983-1, 1981-2, 1984-1	None - $1,000	partnership - N/A	None - $200	
SP	MCNEIL REAL ESTATE FD K-1	None - $1,000	partnership - N/A	$201 - $1,000	

SCHEDULE III -- ASSETS AND "UNEARNED" INCOME

SP	MAJCO LIQUIDATING TRUST	None - $1,000	N/A	$201 - $1,000	
	QUALIFIED PENSION IRA	None - $1,000	N/A	NA	
	CONGRESSIONAL FED CREDIT UNION	$15,001 - $50,000	Interest	$201 - $1,000	
SP	BANK OF GRANITE	$15,001 - $50,000	Interest	$201 - $1,000	
	BANK OF GRANITE	$1,001 - $15,000	Interest	None - $200	
SP	NATIONSBANK	$1,001 - $15,000	Interest	$201 - $1,000	
	NATIONSBANK	$1,001 - $15,000	Interest	$201 - $1,000	
JT	JORDAN BRIDGE - LOAN	$1,001 - $15,000	Interest	$201 - $1,000	
JT	MARK WEAVER - LOAN	$1,001 - $15,000	Interest	$201 - $1,000	
	PLASTIC PACKAGING, INC	$1,000,001 - $5,000,000	Dividends	$50,001 - $100,000	
SP	PLASTIC PACKAGING, INC	$250,001 - $500,000	Dividends	$1,001 - $2,500	
	PLASTIC PACKAGING ESOP	$100,001 - $250,000	N/A	NA	
	FPA PARAMOUNT FUND	$1,001 - $15,000	Dividends	$201 - $1,000	
	MEDTECH	None - $1,000	Dividends	None - $200	
	PRUTECH RESEARCH & DEV	None - $1,000	partnership - N/A	None - $200	S
	SCARMARDO	None - $1,000	Rent - %	None - $200	S
	GENERAL INSTRUMENTS	None - $1,000	Dividends	None - $200	
	PLASTIC PACKAGING 401(K)	None - $1,000	N/A	NA	withdrawn
SP	PLASTIC PACKAGING 401(K)	None - $1,000	N/A	NA	withdrawn
	REPUBLIC INDUSTRIES	None - $1,000	Dividends	None - $200	Gifted
	DELAWARE CHARTER IRA	None - $1,000	N/A	None - $200	Transferred to other IRA
	RESOURCE TRUST IRA	None - $1,000	N/A	None - $200	Transferred to other IRA

SCHEDULE IV -- TRANSACTIONS

Report any purchase, sale, or exchange by you, your spouse, or dependent child during the reporting year of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child, or the purchase or sale of your personal residence, unless it is rented out. For further information, see Instructions, pages 20-21.

SP,DC,JT	Asset	Type of Transaction	Date	Amount of Transaction
	Example Mega Corporation Common Stock	Purchase	10/12/94	$15,001 - $50,000
	TRAWEEK PROSPECT #1-H WELL	Purchase	12/97	$1,001 - $15,000
	HEINE PROSPECT #1-H WELL	Purchase	12/97	$1,001 - $15,000
	GREAT WESTERN WELCH '7777'	Sold	3/27/97	Ø
	ARMSTRONG WORLD INDUSTRIES	Purchase	8/26/97	$15,001 - $50,000
	COMMSCOPE, INC	Spin off - General instruments	8/1/97	$1,001 - $15,000
	GENERAL SEMICONDUCTOR, INC	Spin off - General instruments	8/1/97	$1,001 - $15,000
	HIGHWOODS PROPERTIES	Purchase	8/26/97	$1,001 - $15,000
	OUTBOARD MARINE CORP	Sold	9/17/97	$1,001 - $15,000
	PRENTISS PROPERTIES TRUST	Purchase	8/1/97	$1,001 - $15,000
	SPIEKER PROPERTIES, INC	Purchase	8/26/97	$1,001 - $15,000
	TIMKEN COMPANY	Purchase	8/1/97	$1,001 - $15,000
	THE WILLIAMS COMPANIES	Purchase	10/7/97	$1,001 - $15,000
	CORNING, INC	Purchase	5/30/97	$1,001 - $15,000
SP	AMERICAN GOVT INCOME	Sold	11/12/97	$1,001 - $15,000
SP	CORRECTIONS CORP OF AMERICA	Purchase	11/12/97	$15,001 - $50,000
SP	EARTHGRAINS CO	Purchase	3/7/97	$1,001 - $15,000
SP	TAMBRANDS, INC	Exchange	7/22/97	$15,001 - $50,000
SP	REPUBLIC INDUSTRIES, INC	Sold	11/12/97	$15,001 - $50,000
SP	TII INDUSTRIES, INC	Sold	11/12/97	$1,001 - $15,000
SP	AT & T CORP	Sold	2/10/97	$1,001 - $15,000
SP	CORNING, INC	Purchase	VARIOUS	$15,001 - $50,000
SP	DIAMOND OFFSHORE DRILLING	Purchase	10/2/97	$15,001 - $50,000

SCHEDULE IV -- TRANSACTIONS

Report any purchase, sale, or exchange by you, your spouse, or dependent child during the reporting year of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child, or the purchase or sale of your personal residence, unless it is rented out. For further information, see Instructions, pages 20-21.

SP DC JT	Asset	Type of Transaction	Date	Amount of Transaction
	Example: Mega Corporation Common Stock	Purchase	10/12/94	$15,001 - $50,000
SP	GTE CORP	Sold	2/10/97	$15,001 - $50,000
SP	LUCENT TECHNOLOGIES	Sold	2/10/97	$1,001 - $15,000
SP	TEXTRON, INC	Purchase	11/20/97	$15,001 - $50,000
SP	TIMKEN CO	Purchase	10/2/97	$15,001 - $50,000
SP	WENDY'S INTL	Purchase	5/8/97	$15,001 - $50,000
SP	WILLIAMS CO	Purchase	10/16/97	$1,001 - $15,000
SP	FRESNIUS MED CARE STOCK	Sold	11/20/97	$15,001 - $50,000
SP	FRESNIUS NAT MED CARE PFD	Sold	11/20/97	$1,001 - $15,000
SP	GT LATIN AMERICA GROWTH RD	Purchase	12/17/97	$15,001 - $50,000
SP	PHOENIX MIDCAP PFT CL A	Purchase	12/22/97	$1,001 - $15,000
SP	MECKLENBURG CNTY 5 75% BOND	Purchase	11/17/97	$50,001 - $100,000
SP	HOMESTEAD EL WTR 5 6% BOND	Sold	10/1/97	$1,001 - $15,000
SP	WI ST HLTH FAC 7 3% BOND	Sold	11/5/97	$1,001 - $15,000
	AMERICAN STORES CO NEW	Gifted	7/17/97	$15,001 - $50,000
	CROWN CORK & SEAL CO	Gifted	7/17/97	$1,001 - $15,000
	WALT DISNEY COMPANY	Gifted	7/17/97	$1,001 - $15,000
	HEWLETT PACKARD CO	Gifted	7/17/97	$1,001 - $15,000
	LOWES COMPANIES, INC	Gifted	7/17/97	$15,001 - $50,000
	MCDONALDS CORP	Gifted	7/17/97	$1,001 - $15,000
	SOUTHERN NATIONAL CORP	Spin off - BB&T	1/97	$1,001 - $15,000
SP	NYNEX CORP	Exchange	6/97	$1,001 - $15,000
SP	PACIFIC TELESIS CORP	Exchange	6/97	$1,001 - $15,000

SCHEDULE IV -- TRANSACTIONS

Report any purchase, sale, or exchange by you, your spouse, or dependent child during the reporting year of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child, or the purchase or sale of your personal residence, unless it is rented out. For further information, see Instructions, pages 20-21.

SP,DC,JT	Asset	Type of Transaction	Date	Amount of Transaction
	Example Mega Corporation Common Stock	Purchase	10/12/94	$15,001 - $50,000
	SEARS ROEBUCK & CO	Gifted	7/17/97	$1,001 - $15,000
	CISCO SYSTEMS	Gifted	7/17/97	$1,001 - $15,000
	COMPAQ COMPUTER CORP	P/ Gifted	7/17/97	$15,001 - $50,000
	FURNITURE BRANDS INTL, INC	Gifted	7/17/97	$1,001 - $15,000
	GT GLOBAL LATIN AMERICAN GROWTH	Gifted	7/17/97	$1,001 - $15,000
	IMATION CORP	Gifted	7/17/97	$1,001 - $15,000
SP	BB & T CORP	spin off - So. Nat'l	1/97	$1,001 - $15,000
	MEDTECH	Purchase	1/97	$1,001 - $15,000
	PRUTECH RESEARCH & DEV.	Sold	1/97	Ø
	SCARMARDO	Sold	1/97	Ø
	PLASTIC PACKAGING 401(K)	withdrawn	1/97	$1,001 - $15,000
SP	PLASTIC PACKAGING 401(K)	withdrawn	1/97	$1,001 - $15,000
	DELAWARE CHARTER IRA	**	1/97	Ø
	RESOURCE TRUST IRA	**	1/97	$1,001 - $15,000
	REPUBLIC INDUSTRIES	Gifted	3/1/97	$1,001 - $15,000
SP	SOUTHERN NATIONAL CORP	spin off - BB&T	1/97	$1,001 - $15,000
	BB & T CORP	spin off - So. Nat'l	1/97	$1,001 - $15,000

** Transferred to Raymond James IRA's.

SCHEDULE V -- LIABILITIES

Report liabilities of over $10,000 owed to any one creditor ***at any time*** during the reporting period by you, your spouse, or dependent child. Mark the highest amount owed during the year.
Exclude: Any mortgage on your personal residence (unless it is rented out), loans secured by automobiles, household furniture, or appliances, and liabilities owed to a spouse, or the child, parent, or sibling of you or your spouse. Report ***revolving charge accounts*** only if the balance at the end of the reporting period exceeded $10,000. For further information, see Instructions, pages 21-22.

SP,DC,JT	Creditor	Type of Liability	Amount of Liability
	Example First Bank of Wilmington, Delaware	Mortgage on 123 Main St., Dover, Del	$100,001 - $250,000

SCHEDULE VI -- GIFTS

Report the source, a brief description, and the value of all gifts totalling more than $250 received by you, your spouse, or a dependent child from any source during the year

Exclude: Gifts from relatives, gifts of personal hospitality of an individual, local meals, and gifts to a spouse or dependent child that are totally independent of his or her relationship to you Gifts with a value of $100 or less need not be added towards the $250 disclosure threshold

Note: The gift rule (House Rule 52 in the 104th Congress, renumbered as House Rule 51 of the 105th Congress) prohibits gifts except as specifically provided in the rule

For further information, see Instructions, pages 22-24

Source	Description	Value
Example Mr. Joseph H. Smith, Anytown, Anystate	Silver Platter (waiver received from Committee on Standards)	$270
		$

SCHEDULE VII -- TRAVEL PAYMENTS AND REIMBURSEMENTS

Identify the source and list travel itinerary, dates, and nature of expenses provided for travel and travel-related expenses totalling more than $250 received by you, your spouse, or a dependent child during the reporting period. Indicate whether a family member accompanied the traveler at the sponsor's expense, and the amount of time, if any, that was not at the sponsor's expense. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor.
Exclude: Travel-related expenses provided by federal, state and local governments, or by a foreign government required to be separately reported under the Foreign Gifts and Decorations Act (5 U.S.C. 7342), travel paid for by a Federal political committee, travel provided to a spouse or dependent child that is totally independent of his or her relationship to you. For further information, see Instructions, pages 24-26.

Source	Date(s)	Point of Departure--Destination--Point of Return	Lodging? (Y/N)	Food? (Y/N)	Was a Family Member Included? (Y/N)	Any time **not** at sponsor's expense
Examples Chicago Chamber of Commerce	Mar 2	Wash., D.C.-Chicago-Wash., D.C.	N	N	N	N
Mega Corporation	Aug 6-13	Wash., D.C.-Los Angeles-Cleveland	Y	Y	Y	4 Days
PLASTIC PACKAGING, INC	MARCH 7-10	WASH, D.C. - HICKORY, NC - WASH, D.C.	N	N	Y	N
PLASTIC PACKAGING, INC	JUNE 20-23	WASH, D.C. - HICKORY, NC - WASH, D.C.	N	N	Y	N
PLASTIC PACKAGING, INC	SEPT. 5-7	WASH, D.C. - HICKORY, NC - WASH, D.C.	N	N	Y	N

SCHEDULE VIII -- POSITIONS

Report all positions, compensated or uncompensated, held during the current calendar year as an officer, director, trustee of an organization, partner, proprietor, representative, employee, or consultant of any corporation, firm, partnership, or other business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States. For further information, see Instructions, page 26.

Exclude: Positions held in any religious, social, fraternal, or political entities, positions solely of an honorary nature, and positions listed on Schedule I.

Position	Organization
CHAIRMAN OF THE BOARD	PLASTIC PACKAGING, INC
LIMITED PARTNER	ASSOCIATED APARTMENT INVESTORS
LIMITED PARTNER	OAK PLANTATION ASSOCIATED, LTD
LIMITED PARTNER	DYCO PETROLEUM

SCHEDULE IX -- AGREEMENTS

Identify the date, parties to, and general terms of any agreement or arrangement with respect to: future employment, a leave of absence during the period of government service, continuation or deferral of payments by a former or current employer other than the U.S. Government, or continuing participation in an employee welfare or benefit plan maintained by a former employer. For further information, see Instructions, pages 26-27.

Date	Parties To	Terms of Agreement
	SEE ATTACHED LETTER	

CASS BALLENGER
10TH DISTRICT, NORTH CAROLINA
DEPUTY MAJORITY WHIP
REPUBLICAN STEERING COMMITTEE
COMMITTEE ON EDUCATION AND THE WORKFORCE
SUBCOMMITTEE ON WORKFORCE PROTECTIONS (CHAIRMAN)
EMPLOYER-EMPLOYEE RELATIONS
INTERNATIONAL RELATIONS COMMITTEE
SUBCOMMITTEE ON WESTERN HEMISPHERE
SUBCOMMITTEE ON INTERNATIONAL OPERATIONS AND HUMAN RIGHTS

Congress of the United States
House of Representatives
Washington, DC 20515–3310

2182 RAYBURN HOUSE OFFICE BUILDING
WASHINGTON, DC 20515–3310
202–225–2576
cass.ballenger@mail.house.gov
DISTRICT OFFICES:
P.O. BOX 1830
361–10TH AVENUE DRIVE, NE
HICKORY, NC 28603
704–327–4100
1–800–477–2576 TOLL FREE
P.O. BOX 1881
2554 LEWISVILLE-CLEMMONS ROAD
SUITE 107
CLEMMONS, NC 27012
910–766–9455

January 15, 1998

The Honorable James V. Hansen
Chairman
Committee On Standards of Official Conduct
HT2 Capitol
Washington, D. C. 20515

Dear Mr. Chairman:

I am writing to request clarification on the rules governing outside earned income as it relates to a consulting fee I currently receive from my company (see attached letters and replies), as well as a new fringe benefit my company has agreed to offer to me.

As you can see from the attached letters, I have been permitted to receive $20,000 per year for as much as 400 hours of consulting services on implementation of corporate policy decisions. Plastic Packaging, Inc., a company I founded and in which I have controlling interest, is my prinicpal family investment, and I view it important to remain associated with the business to assure that my investment is protected. In previous reponses from the Committee, this annual amount has not been counted as outside earned income for the purposes of the limitation in Rule XLVII.

Now, in recognition of the services I provide to my company, it has agreed to sponsor a life insurance benefit for me. The life insurance benefit consists of life insurance on my life alone, and life insurance that matures upon the death of the survivor of myself and my wife, Donna. The life insurance benefit is structured under what is known as a Split-Dollar Plan.

The economic benefit that is represented by the life insurance under the Split-Dollar Plan will be reported as income for tax purposes. The value of the benefit for 1997 is approximately $9,500. Given the earlier determination by the Committee as it relates to the $20,000 consulting fee, may I accept the $9,500 without violating the outside earned income limitation of $20,040? I would appreciate advice relative to this matter for calendar year 1997 and beyond.

If you have questions or need clarification on any point, please call me or have your staff

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contact my Chief-of-Staff, Patrick Murphy, at 52576. Thank you for your prompt attention to this matter.

Sincerely,

Cass

CASS BALLENGER
Member of Congress

CB:pm

Enclosures (3)

JAMES V. HANSEN, UTAH
CHAIRMAN
LAMAR SMITH, TEXAS
JOEL HEFLEY, COLORADO
BOB GOODLATTE, VIRGINIA
JOE KNOLLENBERG, MICHIGAN

HOWARD L. BERMAN, CALIFORNIA
RANKING DEMOCRATIC MEMBER
MARTIN OLAV SABO, MINNESOTA
ED PASTOR, ARIZONA
CHAKA FATTAH, PENNSYLVANIA
ZOE LOFGREN, CALIFORNIA
SUITE HT-2, THE CAPITOL
(202) 225-7103

ONE HUNDRED FIFTH CONGRESS

U.S. House of Representatives

COMMITTEE ON STANDARDS OF
OFFICIAL CONDUCT

Washington, DC 20515–6328

February 20, 1998

FEB 25 1998

The Honorable Cass Ballenger
U.S. House of Representatives
2182 Rayburn House Office Building
Washington, DC 20515

Dear Colleague:

This responds to your letter of January 15, 1998 regarding your earned income from Plastic Packaging, Inc., a company that you founded and in which you have the controlling interest. In substance, the question posed in your letter is whether you may accept from the company, in addition a $20,000 per year consulting fee, a life insurance benefit that the company is sponsoring for you in recognition of your services to the company. Your letter states that the benefit is structured under a Split-Dollar Plan, the economic benefit of which is reported as income for tax purposes, and that the value of the benefit for 1997 is approximately $9,500.

As your letter recognizes, while the outside earned income of Members and senior staff is limited by both statute and House rule[1], clause 4(e) of House Rule 47 explicitly excepts a number of items from the definition of the term "outside earned income," and hence from the outside earned income limitation. One part thereof, clause 4(e)(4), provides an exception for income from a family business in the following circumstances:

> in the case of a Member, officer or employee engaged in a trade or business in which the individual or his family holds a controlling interest and in which both personal services and capital are income-producing factors, any amount received by such individual so long as the personal services actually rendered by the individual in the trade or business do not generate a significant amount of income.

Thus this provision excepts from the outside earned income limit amounts that a Member receives from a business where three requirements are satisfied: (1) the Member or his family holds a controlling interest in the business, (2) the nature of the business is such that both personal services and capital are income-producing factors, and (3) the personal services that the Member renders for the business are of a nature that they do not generate a significant amount of money. The intent of this provision, as reflected in the report of the House Commission on Administrative Review, was that,

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[1] 5 U.S.C. app. 4 §501(a); House Rule 47, cl. 1(a).

> Members should be able to render personal services to manage or protect their equity in a family trade or business without having to allocate these personal services toward the 15-percent limitation.

H.Doc. 95-73, 95th Cong., 1st Sess. (Feb. 14, 1977).

In letters to you of February 25, 1987 and October 27, 1990, copies of which you attached to your current letter, the Committee determined the provision's requirements were satisfied with regard to Plastic Packaging and the consulting services (of up to 400 hours per year) that you render for the company, and that hence the $20,000 per year fee that you receive for those services would not be counted toward the outside earned income limit.[2] Both of those letters reflected the Committee's view that your limited efforts in behalf of the company appeared to be aimed at preserving your equity in the company, consistent with the intent of the provision, rather than generating income for the company.

The Committee understands from your current letter that you continue to have the controlling interest in Plastic Packaging. In view of the Committee's prior determinations regarding your consulting fee from the company, the economic benefit of the Split-Dollar Plan life insurance that the company is sponsoring for you, as described in your letter, likewise need not be counted as outside earned income for purposes of the outside earned income limit – provided, however, that there has been no significant change since 1990 in either the nature of the business of Plastic Packaging, or the nature or level of the services that you render for the company. If any such changes have occurred, you should contact the Committee for further advice. Otherwise, the economic benefit of the life insurance, like your consulting fee, should be reported on your annual Financial Disclosure Statement.

If you have any further questions, please contact the Committee's Office of Advice and Education at extension 5-3787.

Sincerely,

James V. Hansen
Chairman

Howard L. Berman
Ranking Democratic Member

[2] The Committee's letter of October 27, 1990 also reflected the Committee's determination that the consulting fee you receive from the company does not violate the "fiduciary relationship" provisions of the Ethics in Government Act and the House rules that took effect of January 1, 1991. 5 U.S.C. app. 4 §502(a); House Rule 47, cl. 2.

10th District, North Carolina
218 Cannon House Office Building
Washington, DC 20515
202-225-3676

COMMITTEES:
EDUCATION AND LABOR
PUBLIC WORKS AND TRANSPORTATION

Congress of the United States
House of Representatives
Washington, DC 20515

361-10th Avenue Drive, N.
Hickory, NC 28601
704-327-9109

P.O. Box 970
418 South Street
Gastonia, NC 28053
704-864-8822

March 20, 1990

The Honorable Julian Dixon
Chairman
The Committee on Standards of
Official Conduct
HT-2, U.S. Capitol
Washington, D.C. 20515

Dear Julian:

I would appreciate clarification on limitations on outside earned income as it relates to a consulting fee I currently receive (see attached letter) from my company, in light of the changes mandated by the Ethics Reform Act of 1989 (Public Law 101-194).

As you can see from the attached letter, I have been permitted to receive $20,000 per year for as much as 400 hours of consulting services on implementation of corporate policy decisions. Plastic Packaging, Inc., a company I founded and in which I have controlling interest, is my principal family investment and I view it important to remain associated with the business to assure that my investment is protected.

Please advise me relative to any exemption of these fees from the limits on outside income for calendar year 1990 as prescribed under clause 2(b)(1) of House Rule XLVII as revised by Public Law 101-194. Further, I would appreciate advice relative to this matter for calendar year 1991 and beyond.

If you have questions or need clarification on any point, please call me or have your staff contact my administrative assistant, Patrick Murphy, at 225-2576.

Thank you for your prompt attention to this matter.

Sincerely,

Cass Ballenger

CASS BALLENGER
Member of Congress

CB:pcm

Enclosure

U.S. House of Representatives

COMMITTEE ON STANDARDS OF
OFFICIAL CONDUCT

Washington, DC 20515

February 25, 1987

The Honorable Cass Ballenger
United States House of Representatives
116 Cannon House Office Building
Washington, D. C. 20515

Dear Colleague:

This is in response to your letter of January 16, 1987, requesting the advice of this Committee regarding the propriety of your receipt of certain compensation from Plastic Packaging, Inc. Your correspondence elaborates on information provided in an earlier meeting with Committee Counsel Mark Davis.

You explain that you served as President of Plastic Packaging, Inc., from its founding in 1956 until your election to the House of Representatives. While you remain the majority stockholder and Chairman of the Board, you no longer have day-to-day operating responsibilities. In lieu of the salary previously paid to you, Plastic Packaging, Inc., intends to pay you $20,000 per year for as much as 400 hours of consulting services on implementation of corporate policy decisions. You further explain that Plastics Packaging, Inc., is your principal family investment, and you view it important to remain associated with the business to assure that your investment is protected.

The provision implicated by your inquiry is House Rule XLVII, which limits the amount of outside earned income which a Member of the House of Representatives may receive in a calendar year to 30 percent of the Member's aggregate yearly congressional salary. As provided in the Rule, the term "outside earned income" means "wages, salaries, professional fees, honorariums, and other amounts ... received as compensation for personal services actually rendered." Several exemptions are noted, however. Clause 3(d)(4) of Rules XLVII specifically states that outside earned income does not include--

> in the case of a Member engaged in a trade or business in which the Member or his family holds a controlling interest and in which both personal services and capital are income-producing factors, any amount received

by such Member so long as the personal services actually rendered by the Member in the trade or business do not generate a significant amount of income.

The Committee is of the opinion that the services you will be performing for Plastic Packaging, Inc., and compensation in the amount specified, fall within the stated exemption. The purpose of the exemption, as stated by the Commission on Administrative Review of the 95th Congress, is to enable Members to protect their interest in a family business. (See, House Document 95-73, p. 11; see also, Advisory Opinion No. 13, House Select Committee on Ethics, 95th Congress.) Further evidence of the fact that your efforts are aimed at preserving your equity, rather than generating a significant amount of income, is the limited time you plan to devote to the business. The Committee also notes that the amount of compensation you will be receiving from the corporation is substantially less than that reported for prior years on the Financial Disclosure Statement which you filed as a candidate.

While this compensation will not be counted as outside earned income for the purposes of the limitation in Rule XLVII, please note that it still must be reported on the Financial Disclosure Statement you are required to file as a Member of the House of Representatives by May 15th of each year. For purposes of clarity, we suggest that you note on the Statement that this income is from a family business and exempt from application of Rule XLVII.

If you have any further questions concerning this matter, please contact the Committee staff at extension 5-7103.

Sincerely,

Julian C. Dixon
Chairman

Lloyd D. Spence
Ranking Minority Member

JS:MJD

JAMES C. BOSKE, CALIFORNIA, CHAIRMAN
NC FAZIO, CALIFORNIA
BERNARD J. DWYER, NEW JERSEY
ALAN B. MOLLOHAN, WEST VIRGINIA
JOSEPH M. GAYDOS, PENNSYLVANIA
CHESTER G. ATKINS, MASSACHUSETTS
(202) 225-7103

CHARLES PASHAYAN, JR., CALIFORNIA
THOMAS L. PETRI, WISCONSIN
LARRY J. CRAIG, IDAHO
FRED GRANDY, IOWA
RALPH L. LOTTER, CHIEF COUNSEL

U.S. House of Representatives
Committee on Standards of Official Conduct
Suite HT-2, U.S. Capitol
Washington, DC 20515

October 27, 1990

The Honorable Cass Ballenger
U.S. House of Representatives
218 Cannon House Office Building
Washington, D. C. 20515

Dear Colleague:

This is in response to your letter requesting clarification of the limitations on outside earned income as it relates to a consulting fee you receive from your company. The Committee originally addressed this matter in a letter of February 25, 1987, a copy of which you enclosed with your correspondence.

You explain that while a Member of the House you have accepted $20,000 per year from Plastic Packaging, Inc., for as much as 400 hours of consulting services on implementation of corporate policy decisions. You founded the company and have retained controlling interest in it. It is your principal family investment and you continue to view it important to remain associated with the business to assure that your investment is protected. Consistent with Committee advice, this income has not been treated as subject to the earned income limit of House Rule XLVII. In light of the changes mandated by the Ethics Reform Act of 1989 (P.L. 101-194 as amended by P.L. 101-280), you ask if the Committee's earlier advice continues to apply to your situation.

In 1987, you told the Committee that you were Chairman of the Board of Plastic Packaging, Inc., in addition to being majority stockholder. Your Administrative Assistant, Patrick Murphy, has informed Committee Counsel Mark Davis that this continues to be the case. While the corporation does provide you with transportation to attend board meetings, you receive no compensation other than the $20,000 consulting fee.

Several provisions of Federal law and House rules, as amended by the Ethics Reform Act of 1989, are relevant to your inquiry. Members of the House are limited in the amount of outside earned income they may receive in a calendar year by House Rule XLVII. For calendar year 1990, the outside earned income limit is 30 percent of the aggregate yearly congressional salary paid in 1989, or $26,850. House Rule XLVII, clause 1(b)(1). For calendar years after 1991, the earned income limit

will be 15 percent of the January 1 rate of pay in effect for level II of the Executive Schedule (the same rate at which House Members are paid). House Rule XLVII, clause 1(a)(2); see also section 501(a) of the Ethics in Government Act of 1978, as amended (5 U.S.C. app. 7, §501(a), hereinafter cited as "EIGA".

"Outside earned income" is defined in Rule XLVII, clause 3(e), to mean "wages, salaries, fees, and other amounts received or to be received as compensation for personal services actually rendered." Several exemptions are noted, however. Clause 3(e)(4) of Rule XLVII specifically states that outside earned income does not include--

> [I]n the case of a Member engaged in a trade or business in which the Member or his family holds a controlling interest and in which both personal services and capital are income-producing factors, any amount received by such Member so long as the personal services actually rendered by the Member in the trade or business do not generate a significant amount of income.

Even if compensation is consistent with the definition of "outside earned income" or falls within one of the stated exemptions, certain activities for compensation will be totally prohibited by Federal law and House Rule XLVII beginning January 1, 1991. Section 502 of EIGA (5 U.S.C. app. 7, §502), provides, in pertinent part, that Members of the House, as well as other senior government officials, shall not --

> (1) receive compensation for affiliating with or being employed by a firm, partnership, association, corporation, or other entity which provides professional services involving a fiduciary relationship;
>
> (2) permit that Member's . . . name to be used by any such firm, partnership association, corporation, or other entity;
>
> (3) receive compensation for practicing a profession which involves a fiduciary relationship; [or]
>
> (4) serve for compensation as an officer or member of the board of any association, corporation, or other entity.

See also House Rule XLVII, clause 2.

The statute does not define what constitutes "professional services which involve a fiduciary relationship." That determination has been left to this Committee with respect to House Members and staff, pursuant to its authority under sections 503(1)(A) and 504(b) of EIGA (5 U.S.C. app. 7, §§503(a)(A) and 504(b)). See Report of the House Bipartisan Task Force on Ethics on H.R. 3660, p. 16, Cong. Rec. (daily ed.), Nov. 21, 1989, H9257.

The legislative history of the Ethics Reform Act suggests the primary objectives behind enactment of the prohibition on the paid practice of a profession which involve a fiduciary relationship. The first was to prevent any conflict between the responsibility of a public official to act for the common good and the obligation which would be owed a private client paying compensation. The second was to make certain that official position was not being used for private gain. The third objective was to "ensure that honoraria not reemerge in various kinds of professional fees from outside interests." See Task Force Report, supra, pp. 15-16.

To determine whether employment in which a Member proposes to engage is prohibited under the statute, the Committee is looking at more than the title of the position and the kind of services typically performed by those in the occupation. Subject to further legislative guidance, the Committee is evaluating the nature and circumstances of each individual's particular employment on a case-by-case basis in light of the objectives of the Ethics Reform Act.

With respect to your services for Plastic Packaging, Inc., you are serving as Chairman of the Board but are receiving no compensation other than the consulting fee. (Your receipt of travel expenses to attend board meetings is not considered compensation.) You were paid by Plastic Packaging prior to your election to the House of Representatives, but the $20,000 consulting fee is significantly less than you had been receiving. In addition, the payment is consistent with the policy enunciated in House Rule XLVII to permit a Member to accept compensation to protect his interest in a family business. Your limited efforts appear aimed at preserving your equity, rather than generating income for the company. Such continuing service related to a family-controlled business suggests neither a significant conflict between public and private obligations, nor accrual of a benefit on account of your status as a Member of Congress. Furthermore, payments to you are not in consideration of speeches, appearances, or articles.

Based on the above considerations, we are of the opinion that the services you perform for Plastic Packaging, Inc., and the specified compensation you receive, continue to fall within the cited exemption in House Rule XLVII. Furthermore, your

receipt of this compensation will not be prohibited after January 1, 1991, since we do not view you as performing "professional services involving a fiduciary relationship" for the purposes of section 502 of EIGA and House Rule XLVII.

While this compensation will not be counted as outside earned income for the purposes of the limitation in Rule XLVII, please note that it still must be reported on the Financial Disclosure Statement you are required to file as a Member of the House of Representatives by May 15th of each year.

As stated above, this opinion is subject to reconsideration based on subsequent enactment of legislation or rule changes. If you have any further questions concerning this matter, please contact the Committee's Office of Advice and Education at extension 5-3787.

Sincerely,

Julian C. Dixon
Chairman

John T. Myers
Ranking Minority Member

JS:MJD

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1997

Form A
For use by Members, officers, and employees

98 MAY 15 PM 12:56

OFFICE OF THE CLERK
U.S. HOUSE OF REPRESENTATIVES

HAND DELIVERED (4)
(Office Use Only)

Hon. James A. Barcia
(Full Name)

2419 Rayburn H.O.B.
(Mailing Address)

Washington DC 20515

Daytime Telephone: (202) 225-8171

Filer Status
[X] Member of the U.S. House of Representatives — State: MI, District: 05
[ ] Officer or Employee — Employing Office

Report Type
[X] Annual (May 15)
[ ] Amendment
[ ] Termination — Termination Date:

A $200 penalty shall be assessed against anyone who files more than 30 days late.

PRELIMINARY INFORMATION -- ANSWER EACH OF THESE QUESTIONS

I. Did you or your spouse have "earned" income (e.g., salaries or fees) of $200 or more from any source in the reporting period? **If yes, complete and attach Schedule I.** — Yes [ ] No [X]

II. Did any individual or organization make a donation to charity in lieu of paying you for a speech, apppearance, or article in the reporting period? **If yes, complete and attach Schedule II.** — Yes [ ] No [X]

III. Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? **If yes, complete and attach Schedule III.** — Yes [X] No [ ]

IV. Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset worth more than $1,000 in the reporting period? **If yes, complete and attach Schedule IV.** — Yes [ ] No [X]

V. Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? **If yes, complete and attach Schedule V.** — Yes [ ] No [X]

VI. Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $250 and not otherwise exempt)? **If yes, complete and attach Schedule VI.** — Yes [ ] No [X]

VII. Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $250 from one source)? **If yes, complete and attach Schedule VII.** — Yes [X] No [ ]

VIII. Did you hold any reportable positions on or before the date of filing in the current calendar year? **If yes, complete and attach Schedule VIII.** — Yes [ ] No [X]

IX. Did you have any reportable agreement or arrangement with an outside entity? **If yes, complete and attach Schedule IX.** — Yes [ ] No [X]

Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION -- ANSWER EACH OF THESE QUESTIONS

TRUSTS - Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child? (See Instructions, pages 10-11.) — Yes [ ] No [X]

EXEMPTION Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption? (See Instructions, page 11.) — Yes [ ] No [X]

CERTIFICATION -- THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended. The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct or its designee. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil penalties and criminal sanctions (See 5 U.S.C. app. 4, 104 and 18 U.S.C. 1001)

SIGNATURE OF REPORTING INDIVIDUAL Jim Barcia

DATE (Month/Day/Year) 5/14/98

SCHEDULE III -- ASSETS AND "UNEARNED" INCOME

	BLOCK A **Asset and/or Income Source** Identify (a) each asset held for investment or production of income with a fair market value exceeding $1,000 at the end of the reporting year, and (b) any other asset or source of income which generated more than $200 in "unearned" income during the year. For rental property or land, provide an address. Provide full names of any mutual funds. For an IRA or retirement plan that is *self-directed*, list the underlying assets worth more than $1,000. For an IRA or retirement plan that is *not* self-directed, name the institution holding the account. **Exclude:** Your personal residence(s) (unless there is rental income); any debt owed to you by your spouse, or by your or your spouse's child, parent, or sibling; any deposits totalling $5,000 or less in personal savings accounts; any financial interests in or income derived from U.S. Government retirement programs. If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC) or is jointly held (JT), in the optional column on the far left. For further information, see Instructions, pages 14-20	BLOCK B **Value of Asset** at close of reporting year. If you use a valuation method other than fair market value, please specify the method used. If an asset was sold and is included only because it generated income, the value should be "None."	BLOCK C **Type of Income** If other than one of the listed categories, specify the type of income by writing a brief description in this block.	BLOCK D **Amount of Income** For IRA's and retirement plans that are *not* self-directed, you may write in "NA" for income.	BLOCK E **Transaction** Indicate if asset was purchased(P), sold(S), or exchanged(E) in reporting year.
SP DC *Examples:* JT	Mega Corp. Stock SP 123 Main St., Dover, Del. 1st Bank of Paducah, KY accounts	$15,001 - $50,000 $250,001 - $500,000 $50,001 - $100,000	Dividends Rent Interest	$201 - $1,000 $1,001 - $2,500 $5,001 - $15,000	P
	Michigan Employee Retirement System	$50,001 - $100,000	Retirement	None - $200	
	Michigan Deferred Compensation Plans	$1,001 - $15,000	Retirement	None - $200	
	Michigan National Bank Accounts	$15,001 - $50,000	Interest	$201 - $1,000	
	40 acres, Bordaux Road, Standish, Michigan	$15,001 - $50,000			
JT	Copco Credit Union, Bay City, Michigan	$15,001 - $50,000	Interest	$201 - $1,000	
JT	Comerica, Inc. - Stocks	$15,001 - $50,000	Dividends	$201 - $1,000	
JT	Fahne Stock Prime Cash Series	$1,001 - $15,000	Dividends	None - $200	
JT	Riegel Energy Corp. Stock	$1,001 - $15,000	Dividends	None - $200	
JT	Total Petroleum North America Stock, Ltd.	$1,001 - $15,000	Dividends	None - $200	

JAMES A. BARCIA
5TH DISTRICT, MICHIGAN

2419 RAYBURN HOB
WASHINGTON, DC 20515–2205
TELEPHONE (202) 225–8171

E-MAIL ADDRESS:
JBARCIA@HR.HOUSE.GOV

Congress of the United States
House of Representatives
Washington, DC 20515–2205

COMMITTEE ON SCIENCE
SUBCOMMITTEE ON
BASIC RESEARCH, RANKING
DEMOCRATIC MEMBER
SUBCOMMITTEE ON
TECHNOLOGY

COMMITTEE ON TRANSPORTATION
AND INFRASTRUCTURE
SUBCOMMITTEE ON
WATER RESOURCES AND ENVIRONMENT
SUBCOMMITTEE ON
SURFACE TRANSPORTATION

Addendum to Schedule III - Assets and "Unearned" Income

In 1996 and prior years, the asset currently reported as "Fahne Stock Prime Cash Series" was reported as "Renaissance Money Market Fund". This is a change in name only as a result of a market action involving the fund itself, and not as a result of any transactions on our part.

DISTRICT OFFICE
503 N. EUCLID
SUITE 11
BAY CITY, MI 48706
TELEPHONE (517) 667–0003

DISTRICT OFFICE
5409 PIERSON ROAD
FLUSHING, MI 48433
TELEPHONE (810) 732–7501

DISTRICT OFFICE
301 EAST GENESEE
SUITE 502
SAGINAW, MI 48607
TELEPHONE (517) 754–6075

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SCHEDULE VII -- TRAVEL PAYMENTS AND REIMBURSEMENTS

Identify the source and list travel itinerary, dates, and nature of expenses provided for travel and travel-related expenses totalling more than $250 received by you, your spouse, or a dependent child during the reporting period. Indicate whether a family member accompanied the traveler at the sponsor's expense, and the amount of time, if any, that was not at the sponsor's expense. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor **Exclude:** Travel-related expenses provided by federal, state and local governments, or by a foreign government required to be separately reported under the Foreign Gifts and Decorations Act (5 U.S.C. 7342); travel paid for by a Federal political committee, travel provided to a spouse or dependent child that is totally independent of his or her relationship to you. For further information, see Instructions, pages 24-26.

	Source	Date(s)	Point of Departure--Destination--Point of Return	Lodging? (Y/N)	Food? (Y/N)	Was a Family Member Included? (Y/N)	Any time not at sponsor's expense
Examples:	Chicago Chamber of Commerce	Mar.2	Wash., D.C.-Chicago-Wash., D.C.	N	N	N	N
	Mega Corporation	Aug.6-13	Wash., D.C.-Los Angeles-Cleveland	Y	Y	Y	4 Days
Safari Club International		01/29 - 02/04/97	Saginaw - Las Vegas, NV - Washington - transportation expense not included	Y	Y	Y	Yes - Two Days

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(8)

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1997

FORM A

For use by Members, officers, and employees

BOB BARR
(Full Name)

1130 LONG WORTH
WASHINGTON DC 20515
(Mailing Address)

202/225-2931
Daytime Telephone

(Office Use Only)

Filer Status

- [X] Member of the U.S. House of Representatives — State GA District 07
- [ ] Officer or Employee — Employing Office

Report Type

- [X] Annual (May 15)
- [ ] Amendment
- [ ] Termination — Termination Date

A *$200 penalty* shall be assessed against anyone who files more than 30 days late.

PRELIMINARY INFORMATION — ANSWER EACH OF THESE QUESTIONS

I Did you or your spouse have "earned" income (e.g., salaries or fees) of $200 or more from any source in the reporting period? **If yes, complete and attach Schedule I.** — Yes [X] No [ ]

II Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? **If yes, complete and attach Schedule II.** — Yes [X] No [ ]

III Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? **If yes, complete and attach Schedule III.** — Yes [X] No [ ]

IV Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset worth more than $1,000 in the reporting period? **If yes, complete and attach Schedule IV.** — Yes [X] No [X]

V Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? **If yes, complete and attach Schedule V.** — Yes [X] No [ ]

VI Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $250 and not otherwise exempt)? **If yes, complete and attach Schedule VI.** — Yes [ ] No [X]

VII Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $250 from one source)? **If yes, complete and attach Schedule VII.** — Yes [X] No [ ]

VIII Did you hold any reportable positions on or before the date of filing in the current calendar year? **If yes, complete and attach Schedule VIII.** — Yes [X] No [ ]

IX Did you have any reportable agreement or arrangement with an outside entity? **If yes, complete and attach Schedule IX.** — Yes [ ] No [X]

Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION — ANSWER EACH OF THESE QUESTIONS

TRUSTS—Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child? — Yes [ ] No [X]

EXEMPTION—Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption? — Yes [ ] No [X]

CERTIFICATION — THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended. The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct or its designee. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil penalties and criminal sanctions (*See* 5 U.S.C. app. 4, §104 and 18 U.S.C. §1001).

SIGNATURE OF REPORTING INDIVIDUAL

DATE (Month/Day/Year) 5/13/98

SCHEDULE I — EARNED INCOME

List the source, type, and amount of earned income from any source (other than the filer's current employment by the U.S Government) totalling $200 or more during the preceding calendar year. For a spouse, list the source and amount of any honoraria; list only the source for other spouse earned income exceeding $1,000.

	Source	Type	Amount
Examples	Keene State	Approved Teaching Fee	$6,000
	State of Maryland	Legislative Pension	$9,000
	Civil War Roundtable (Oct 2nd)	Spouse Speech	$1,000
	Ontario County Board of Education	Spouse Salary	NA
	COBB FAMILY RESOURCES, MARIETTA, GA	SPOUSE SALARY	N/A

For payments to charity in lieu of honoraria, use Schedule II.

SCHEDULE II — PAYMENTS IN LIEU OF HONORARIA MADE TO CHARITY

List the source, activity (i.e., speech, appearance, or article), date, and amount of any payment made by the sponsor of an event to a charitable organization in lieu of an honorarium. A separate confidential list of charities receiving such payments must be filed directly with the Committee on Standards of Official Conduct. An envelope for transmitting the list is included in each Member's filing package.

Source	Activity	Date	Amount
Examples Association of American Associations, Wash., D.C.	Speech	Feb. 2, 1997	$2,000
XYZ Magazine	Article	Aug. 13, 1997	$500
LIFE UNIVERSITY, MARIETTA, GA	SPEECH	June 15, 1997	$1,000

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SCHEDULE III — ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Name BOB BARR | Page 4 of 8

SP, DC, JT	BLOCK A: Asset and/or Income Source	BLOCK B: Year-End Value of Asset												BLOCK C: Type of Income							BLOCK D: Amount of Income											BLOCK E: Transaction
		A None	B $1 – $1,000	C $1,001 – $15,000	D $15,001 – $50,000	E $50,001 – $100,000	F $100,001 – $250,000	G $250,001 – $500,000	H $500,001 – $1,000,000	I $1,000,001 – $5,000,000	J $5,000,001 – $25,000,000	K $25,000,001 – $50,000,000	L Over $50,000,000	DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Type of Income (Specify)	I None	II $1 – $200	III $201 – $1,000	IV $1,001 – $2,500	V $2,501 – $5,000	VI $5,001 – $15,000	VII $15,001 – $50,000	VIII $50,001 – $100,000	IX $100,001 – $1,000,000	X $1,000,001 – $5,000,000	XI Over $5,000,000	P, S, E
	IRA, SUNTRUST				X											X					N/A										
JT	CHECKING, SUNTRUST			X												X						X									
SP	ANNUITY, MUTUAL AMER.				X											X						N/A									
SP	CREDIT UNION, C-MAR		X													X						X									
SP	ANNUITY, LINCOLN LIFE			X												X						N/A									E 1
SP	IRA, LINCOLN LIFE			X												X						N/A									E 1
SP	IRA, LINCOLN LIFE			X												X						N/A									E 2
JT	CREDIT UNION, CONGRESS		X													X						X									

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1 - Exchanged from IRA, Mutual of America

2. Exchanged from IRA Cobb Federal

SCHEDULE IV — TRANSACTIONS

Name Bob BARR | Page 5 of 8

Report any purchase, sale, or exchange by you, your spouse, or dependent child during the reporting year of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child, or the purchase or sale of your personal residence, unless it is rented out.		Type of Transaction			Date	Amount of Transaction									
		PURCHASE	SALE	EXCHANGE	MO/DA/YR	B $1,001 – $15,000	C $15,001 – $50,000	D $50,001 – $100,000	E $100,001 – $250,000	F $250,001 – $500,000	G $500,001 – $1,000,000	H $1,000,001 – $5,000,000	I $5,000,001 – $25,000,000	J $25,000,001 – $50,000,000	K Over $50,000,000
ID	Asset Example / Mega Corporation Common Stock				1/2-2-97		X								
SP	ANNUITY, LINCOLN LIFE			X[1]	1997	X									
SP	IRA, LINCOLN LIFE			X[1]	1997	X									
SP	IRA, LINCOLN LIFE			X[2]	1997	X									
	[1] Exchange from IRA, Mutual of Amer														X
	[2] Exchange from IRA, Cobb Federal														X

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Name BOB BARR | Page 6 of 8

SCHEDULE V — LIABILITIES

Report liabilities of over $1,000 owed to any one creditor at any time during the reporting period by you, your spouse, a dependent child. Mark the highest amount owed during the year. Exclude: Any mortgage on your personal residence (unless it is rented out); loans secured by automobiles, household furniture, or appliances; and liabilities owed to a spouse, or the child, parent, or sibling of you or your spouse. Report revolving charge accounts only if the balance at the end of the reporting period exceeded $10,000.

SP DC JT	Creditor	Type of Liability	Amount of Liability B	C	D	E	F	G	H	I	J	K
	Example: First Bank, Wilmington, Delaware	*Mortgage on 123 Main St., Dover, Del.*				X						
	SUNTRUST BANK, MARIETTA, GA	NOTE	X									
JT	CONGRESSIONAL FED CU	CR CARD LOANS		X								

SCHEDULE VI — GIFTS

Report the source, a brief description, and the value of all gifts totaling more than $250 received by you, your spouse, or a dependent child, from any source during the year.

Exclude: Gifts from relatives; gifts of personal hospitality of an individual; food, lodging, and gifts of a spouse or dependent child that are totally independent of his or her relationship to you. Gifts with a value of $138 or less need not be aggregated for the $250 reportable threshold.

Note: The gift rule (House Rule XLV) prohibits gifts except as specifically provided in the rule.

Source	Description	Value
Example: Mr. Joseph H. Smith, Anytown, Anystate	*Silver Plate, Commemorative of Lectures or Speeches*	*$210*

Use additional sheets if more space is required.

Name BOB BARR | Page 8 of 8

SCHEDULE VII —TRAVEL PAYMENTS AND REIMBURSEMENTS

Identify the source and list travel itinerary, dates, and nature of expenses provided for travel and travel-related expenses totalling more than $250 received by you, your spouse, or a dependent child during the reporting period. Indicate whether a family member accompanied the traveler at the sponsor's expense, and the amount of time, if any, that was not at the sponsor's expense. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor.

Exclude: Travel-related expenses provided by federal, state, and local governments, or by a foreign government required to be separately reported under the Foreign Gifts and Decorations Act (5 U.S.C. § 7342); travel paid for by a Federal political committee; travel provided to a spouse or dependent child that is totally independent of his or her relationship to you.

Source	Date(s)	Point of Departure—Destination—Point of Return	Lodging? (Y/N)	Food? (Y/N)	Was a Family Member Included? (Y/N)	Any time not at sponsor's expense
Examples: Chicago Chamber of Commerce	Mar. 2	Wash., D.C.—Chicago—Wash., D.C.	N	N	N	N
Examples: Roycroft Corporation	Aug. 6–13	Wash., D.C.—Los Angeles—Cleveland	Y	Y	Y	4 Days
AMERICAN-ISRAEL EDU. FOUNDATION	Jan. 9-17	ATLANTA - ISRAEL - ATLANTA	Y	Y	Y	N
ASPEN INSTITUTE	Mar. 7-9	WASH. D.C. — Hershey Pa - Wash DC	Y	Y	Y	N
NATIONAL RIFLE ASSN	MAY 2-5	ATLANTA - SEATTLE - ATLANTA	Y	Y	Y	N
AMERICAN LEGION	July 18-20	ATLANTA - SAVANNAH - ATLANTA	Y	Y	N	N
IND. INSURANCE AGENTS (GA.)	July 25-27	ATLANTA - JEKYLL IS. - ATLANTA	Y	Y	Y	N
DR. CECELIA CHANG, ST. JOHNS UNIV. (N.Y.)	Aug 9-11	ATLANTA - N.Y. - ATLANTA	Y	Y	Y	N
FIRST AMENDMENT CENTER VANDERBILT UNN. (TENN.)	Aug. 29	ATLANTA - NASHVILLE - ATLANTA	N	N	N	N
ASSN. FOR PROMOTION OF PSYCHOLOGICAL KNOWLEDGE ABOUT HUMAN NATURE	Sept. 5-8	WASH. D.C. - ZURICH - WASH. D.C.	Y	Y	N	N
GEORGIA TEXTILE MANUFACTURERS ASSN.	Sept. 13-15	ATLANTA - SEA ISLAND - ATLANTA	Y	Y	Y	N
CITIZENS COMMITTEE FOR RIGHT TO BEAR ARMS	Sept. 27-28	ATLANTA - DENVER - ATLANTA	Y	Y	Y	N
JOHN BIRCH SOCIETY	Oct. 18-20	ATLANTA - SAN FRANCISCO - ATLANTA	Y	Y	Y	N
EAGLE FORUM	Oct. 25	ATLANTA - WAYCROSS - ATLANTA	N	Y	N	N
LAW ENFORCEMENT ALLIANCE OF AMERICA	Nov. 1-2	ATLANTA - WASH. D.C. - ATLANTA	Y	Y	N	N
FREE CONGRESS FOUNDATION	Nov. 15	WASH. D.C. - ATLANTA	N	Y	N	N
NATL ASSN OF ARMS SHOWS	Nov. 19	ATLANTA - WASH. D.C. - ATLANTA	N	Y	N	N

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SCHEDULE VIII — POSITIONS

Report all positions, compensated or uncompensated, held during the current calendar year as an officer, director, trustee of an organization, partner, proprietor, representative, employee, or consultant of any corporation, firm, partnership, or other business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States.

Exclude: Positions held in any religious, social, fraternal, or political entities; positions solely of an honorary nature; and positions listed on Schedule I.

Position	Name of Organization
PRESIDENT	THE BARR LAW FIRM, MARIETTA, GA. (NOW, COMPLETELY INACTIVE)
BOARD MEMBER	ATLANTA TASK FORCE FOR HOMELESS (RESIGNED IN 1997)
BOARD MEMBER	FEDERALIST SOC. ADVISORY BD, ATLANTA, GA. (INACTIVE)
BOARD MEMBER	WASH. LEGAL FDTN. NATL. ADVISORY BOARD

SCHEDULE IX — AGREEMENTS

Identify the date, parties to, and general terms of any agreement or arrangement with respect to: future employment; a leave of absence during the period of government service; continuation or deferral of payments by a former or current employer other than the U.S. Government; or continuing participation in an employee welfare or benefit plan maintained by a former employer.

Date	Parties To	Terms of Agreement

GPO 1998 48-260 (mac)

Use additional sheets if more space is required.

98 MAY 15 PM 4:24

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1997

FORM A
For use by Members, officers, and employees

Thomas M. Barrett
(Full Name)

1224 Longworth House Office Building
(Mailing Address)

(202) 225-3571
Daytime Telephone

Washington, DC 20515

HAND DELIVERED
(Office Use Only)

Filer Status	[X] Member of the U.S. House of Representatives	State WI District 05	[ ] Officer or Employee	Employing Office
Report Type	[X] Annual (May 15)	[ ] Amendment	[ ] Termination	Termination Date

A *$200 penalty* shall be assessed against anyone who files more than 30 days late.

PRELIMINARY INFORMATION — ANSWER EACH OF THESE QUESTIONS

I. Did you or your spouse have "earned" income (e.g., salaries or fees) of $200 or more from any source in the reporting period? **If yes, complete and attach Schedule I.** — Yes [ ] No [X]

II. Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? **If yes, complete and attach Schedule II.** — Yes [ ] No [X]

III. Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? **If yes, complete and attach Schedule III.** — Yes [X] No [ ]

IV. Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset worth more than $1,000 in the reporting period? **If yes, complete and attach Schedule IV.** — Yes [X] No [ ]

V. Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? **If yes, complete and attach Schedule V.** — Yes [X] No [ ]

VI. Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $250 and not otherwise exempt)? **If yes, complete and attach Schedule VI.** — Yes [ ] No [X]

VII. Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $250 from one source)? **If yes, complete and attach Schedule VII.** — Yes [X] No [ ]

VIII. Did you hold any reportable positions on or before the date of filing in the current calendar year? **If yes, complete and attach Schedule VIII.** — Yes [ ] No [X]

IX. Did you have any reportable agreement or arrangement with an outside entity? **If yes, complete and attach Schedule IX.** — Yes [ ] No [X]

Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION — ANSWER EACH OF THESE QUESTIONS

TRUSTS—Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child? — Yes [ ] No [X]

EXEMPTION—Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption? — Yes [ ] No [X]

CERTIFICATION — THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended. The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct or its designee. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil penalties and criminal sanctions (*See* 5 U.S.C. app. 4, §104 and 18 U.S.C. §1001)

SIGNATURE OF REPORTING INDIVIDUAL: Thomas M. Barrett — DATE (Month/Day/Year): May 15, 1998

SCHEDULE I — EARNED INCOME

List the source, type, and amount of earned income from any source (other than the filer's current employment by the U S Government) totalling $200 or more during the preceding calendar year. For a spouse, list the source and amount of any honoraria; list only the source for other spouse earned income exceeding $1,000.

	Source	Type	Amount
Examples:	Keene State	Approved Teaching Fee	$6,000
	State of Maryland	Legislative Pension	$9,000
	Civil War Roundtable (Oct. 2nd)	Spouse Speech	$1,000
	Ontario County Board of Education	Spouse Salary	NA
	N/A Congressional salary sole source of earned income		

For payments to charity in lieu of honoraria, use Schedule II.

49-736 98 - 7

SCHEDULE II — PAYMENTS IN LIEU OF HONORARIA MADE TO CHARITY

List the source, activity (i.e., speech, appearance, or article), date, and amount of any payment made by the sponsor of an event to a charitable organization in lieu of an honorarium. A separate confidential list of charities receiving such payments must be filed directly with the Committee on Standards of Official Conduct. An envelope for transmitting the list is included in each Member's filing package.

Source	Activity	Date	Amount
Examples: Association of American Associations, Wash., D.C.	Speech	Feb 2, 1997	$2,000
XYZ Magazine	Article	Aug 13, 1997	$500
N/A			

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Name Thomas M. Barrett | Page 4 of 11

SCHEDULE III — ASSETS AND "UNEARNED" INCOME

BLOCK A — Asset and/or Income Source

Identify (a) each asset held for investment or production of income with a fair market value exceeding $1,000 at the end of the reporting year, and (b) any other asset or source of income which generated more than $200 in "unearned" income during the year. For rental property or land, provide an address. Provide full names of any mutual funds. For an IRA or retirement plan that is *self-directed*, list the underlying assets worth more than $1,000. For an IRA or retirement plan that is not selfdirected, name the institution holding the account.

Exclude: Your personal residence(s) (unless there is rental income); any debt owed to you by your spouse, or by your or your spouse's child, parent, or sibling; any deposits totalling $5,000 or less in personal savings accounts; any financial interests in or income derived from U.S. Government retirement programs.

If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC) or is jointly held (JT), in the optional column on the far left.

BLOCK B — Value of Asset

at close of reporting year. If you use a valuation method other than fair market value, please specify the method used. If an asset was sold and is included only because it generated income, the value should be "None."

BLOCK C — Type of Income

BLOCK D — Amount of Income

For IRA's and retirement plans that are *not* self-directed, you may write in "NA" for income

BLOCK E — Transaction

Indicate if asset was purchased (P), sold (S), or exchanged (E) in reporting year.

	BLOCK A		BLOCK B												BLOCK C							BLOCK D											BLOCK E
			A None	B $1 – $1,000	C $1,001 – $15,000		E $15,001 – $50,000	F $50,001 – $100,000	G $100,001 – $250,000	H $250,001 – $500,000	I $500,001 – $1,000,000	J $1,000,001 – $5,000,000	K $5,000,001 – $25,000,000	L $25,000,001 – $50,000,000	Over $50,000,000	DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Type of Income (Specify. For Example: Partnership Income or Farm Income)	I None	II $1 – $200	III $201 – $1,000	IV $1,001 – $2,500	V $2,501 – $5,000	VI $5,001 – $15,000	VII $15,001 – $50,000	VIII $50,001 – $100,000	IX $100,001 – $1,000,000	X $1,000,001 – $5,000,000	XI Over $5,000,000	P, S, E
SP, DC, JT	*Examples:*	SP	Mega Corp Stock				X									X																		P
			Simon & Schuster			Indefinite																Royalties								X				
			1st Bank of Paducah, KY accounts					X										X									X							
	Great West Life-Dfrd.Comp.						x											x								x								P
	Vanguard Inst.Index- Dfrd. Comp.						x									x			x								x							P
	Janus Fund-Dfrd. Comp.						x									x										x								P
	Fidelity Contrafund Dfrd. Comp.						x												x								x							P

For additional assets and unearned income, use next page.

SCHEDULE III — ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Name: Thomas M. Barrett | Page 5 of 11

SP. DC. JT	BLOCK A Asset and/or Income Source	BLOCK B Year-End Value of Asset: A None	B $1 – $1,000	C $1,001 – $15,000	D $15,001 – $50,000	E $50,001 – $100,000	F $100,001 – $250,000	G $250,001 – $500,000	H $500,001 – $1,000,000	I $1,000,001 – $5,000,000	J $5,000,001 – $25,000,000	K $25,000,001 – $50,000,000	L Over $50,000,000	BLOCK C Type of Income: DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Type of Income (Specify)	BLOCK D Amount of Income: I None	II $1 – $200	III $201 – $1,000	IV $1,001 – $2,500	V $2,501 – $5,000	VI $5,001 – $15,000	VII $15,001 – $50,000	VIII $50,001 – $100,000	IX $100,001 – $1,000,000	X $1,000,001 – $5,000,000	XI Over $5,000,000	BLOCK E Transaction: P, S, E
DC	Southern Company Stock			x										x			x						x								
	(son Tom's stock)																															
DC	Southern Company Stock			x										x			x						x								
	(daughter Anne's stock)																															
DC	Southern Company Stock			x										x			x					x									gift
	(daughter Erin's stock)																															
SP	Aetna Annuity (wife's)			x												x							x								
	Wisconsin Retirement System				x											x								x							
	(separation value)																															
	(income estimated)																															
	Metro Information SVCS	x															x								x						P, S
	Racing Champion Corp.	x															x						x								P, S
	Lunar Corporation	x															x					x									P, S
	Robert W. Baird & Co. (money market fund)			x												x						x									P

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SCHEDULE III — ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Name: Thomas M. Barrett

SP, DC, JT	BLOCK A Asset and/or Income Source	BLOCK B Year-End Value of Asset												BLOCK C Type of Income							BLOCK D Amount of Income										BLOCK E Transaction
		A None	B $1 – $1,000	C $1,001 – $15,000	D $15,001 – $50,000	E $50,001 – $100,000	F $100,001 – $250,000	G $250,001 – $500,000	H $500,001 – $1,000,000	I $1,000,001 – $5,000,000	J $5,000,001 – $25,000,000	K $25,000,001 – $50,000,000	L Over $50,000,000	DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Type of Income (Specify)	I None	II $1 – $200	III $201 – $1,000	IV $1,001 – $2,500	V $2,501 – $5,000	VI $5,001 – $15,000	VII $15,001 – $50,000	VIII $50,001 – $100,000	IX $100,001 – $1,000,000	X $1,000,001 – $5,000,000	XI Over $5,000,000	P, S, E
	DFA US 9-10 Small Co. Dfrd.Comp.			x													x						x								P
	20th Century Select Dfrd.Comp.	x															x						x								S
	20th Century Growth Dfrd. Comp.	x															x						x								S
	Equivest Fund IRA				x											x								x							
	American Funds Group Mutual Fund				x									x			x							x							P
	Educators Credit Union IRA			x										x								x									
	Educators Credit Union Money Market					x								x										x							
	Tellabs, Inc.			x													x							x							P
	A D C Telecomm Inc.			x													x				x										P
	Boeing Co.			x										x								x									P
	CINN Bell Inc.			x										x			x					x									P
	Coherent Communications			x													x							x							P
	Computer Products, Inc.			x													x							x							P
	CYTYC Corp.			x													x					x									P
	Interim Services			x													x						x								P
	Hughes Supply Inc.			x													x						x								P

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SCHEDULE IV — TRANSACTIONS

Report any purchase, sale, or exchange by you, your spouse, or dependent child during the reporting year of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child, or the purchase or sale of your personal residence, unless it is rented out.

SP, DC, JT	Asset	Type of Transaction: PURCHASE	SALE	EXCHANGE	Date (MO/DAY/YR)	Amount of Transaction: B $1,001–$15,000	C $15,001–$50,000	D $50,001–$100,000	E $100,001–$250,000	F $250,001–$500,000	G $500,001–$1,000,000	H $1,000,001–$5,000,000	I $5,000,001–$25,000,000	J $25,000,001–$50,000,000	K Over $50,000,000
SP	*Example* Mega Corporation Common Stock	x			10-12-97		x								
	Boise Cascade Office Products	x			1-23-97	x									
	Boise Cascade Office Products		x		6-27-97	x									
	Cole Taylor Finl Grp. Inc.	x			1-23-97	x									
	Cole Taylor Finl Grp. Inc.		x		1-30-97	x									
	Danka Business Sys. PLC	x			1-23-97	x									
	Danka Business Sys. PLC		x		12-16-97	x									
	St. Jude Medical Inc.	x			1-23-97	x									
	St. Jude Medical Inc.		x		9-23-97	x									
	Metro Information Svcs	x			1-29-97		x								
	Metro Information Svcs		x		1-30-97		x								
	Lunar Corp.	x			3-12-97	x									
	Lunar Corp.		x		3-24-97	x									
	Racing Champion Corp.	x			6-11-97		x								
	Racing Champion Corp.		x		6-25-97		x								
	Danka Business Sys. PLC	x			6-27-97	x									
	Danka Business Sys. PLC		x		12-15-97	x									

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SCHEDULE IV — TRANSACTIONS

Name Thomas M. Barrett | Page 8 of 11

SP, DC, JT	Asset	Type of Transaction: PURCHASE	SALE	EXCHANGE	Date (MO/DAY/YR)	Amount of Transaction: B $1,001–$15,000	C $15,001–$50,000	D $50,001–$100,000	E $100,001–$250,000	F $250,001–$500,000	G $500,001–$1,000,000	H $1,000,001–$5,000,000	I $5,000,001–$25,000,000	J $25,000,001–$50,000,000	K Over $50,000,000
SP	*Example:* Mega Corporation Common Stock	X			10-12-97		X								
	A D C Telecomm, Inc.	x			1-23-97	x									
	Boeing Company	X			1-23-97	x									
	CINN Bell, Inc.	x			3-12-97	x									
	Coherent Communications Systems	x			3-26-97	x									
	Computer Products, Inc.	x			1-23-97	x									
	CYTYC Corporation	x			12-30-97	x									
	Interim Services	x			9-24-97	x									
	Tellabs, Inc.	x			2-4-97	x									

Report any purchase, sale, or exchange by you, your spouse, or dependent child during the reporting year of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child, or the purchase or sale of your personal residence, unless it is rented out.

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SCHEDULE V — LIABILITIES

Report liabilities of over $10,000 owed to any one creditor ***at any time*** during the reporting period by you, your spouse, or dependent child. Mark the highest amount owed during the year. **Exclude**: Any mortgage on your personal residence (unless it is rented out), loans secured by automobiles, household furniture, or appliances, and liabilities owed to a spouse, or the child, parent, or sibling of you or your spouse. Report ***revolving charge accounts*** only if the balance at the end of the reporting period exceeded $10,000.

SP, DC, JT	Creditor	Type of Liability	Amount of Liability									
			B $10,001 – $15,000	C $15,001 – $50,000	D $50,001 – $100,000	E $100,001 – $250,000	F $250,001 – $500,000	G $500,001 – $1,000,000	H $1,000,001 – $5,000,000	I $5,000,001 – $25,000,000	J $25,000,001 – $50,000,000	K Over $50,000,000
Example	First Bank of Wilmington, Delaware	Mortgage on 123 Main St., Dover, Del				x						
	Robert W. Baird & Co.	Loans, margin account	x									

SCHEDULE VI — GIFTS

Report the source, a brief description, and the value of all gifts totalling more than $250 received by you, your spouse, or a dependent child from any source during the year.

Exclude: Gifts from relatives, gifts of personal hospitality of an individual, local meals, and gifts to a spouse or dependent child that are totally independent of his or her relationship to you. Gifts with a value of $100 or less need not be added towards the $250 disclosure threshold.

Note: The gift rule (House Rule 51) prohibits gifts except as specifically provided in the rule.

Source	Description	Value
Example Mr. Joseph H. Smith, Anytown, Anystate	Silver Platter (determination on personal friendship received from Committee on Standards)	$270
N/A		

Use additional sheets if more space is required.

SCHEDULE VII —TRAVEL PAYMENTS AND REIMBURSEMENTS

Identify the source and list travel itinerary, dates, and nature of expenses provided for travel and travel-related expenses totalling more than $250 received by you, your spouse, or a dependent child during the reporting period. Indicate whether a family member accompanied the traveler at the sponsor's expense, and the amount of time, if any, that was not at the sponsor's expense. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor.

Exclude: Travel-related expenses provided by federal, state, and local governments, or by a foreign government required to be separately reported under the Foreign Gifts and Decorations Act (5 U.S.C. § 7342); travel paid for by a Federal political committee; travel provided to a spouse or dependent child that is totally independent of his or her relationship to you.

	Source	Date(s)	Point of Departure—Destination—Point of Return	Lodging? (Y/N)	Food? (Y/N)	Was a Family Member Included? (Y/N)	Any time not at sponsor's expense
Examples:	Chicago Chamber of Commerce	Mar. 2	Wash., D C —Chicago—Wash., D C.	N	N	N	N
	Roycroft Corporation	Aug. 6–13	Wash., D C —Los Angeles—Cleveland	Y	Y	Y	4 Days
	The Faith & Politics Inst.	March 6-8	Wash.,D.C.-Birmingham, Montgomery-Selma-Wash	Y	Y	N	N
	"	"	"	"	"	"	"

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SCHEDULE VIII — POSITIONS

Report all positions, compensated or uncompensated, held during the current calendar year as an officer, director, trustee of an organization, partner, proprietor, representative, employee, or consultant of any corporation, firm, partnership, or other business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States.

Exclude: Positions held in any religious, social, fraternal, or political entities; positions solely of an honorary nature; and positions listed on Schedule I.

Position	Name of Organization
N/A	

SCHEDULE IX — AGREEMENTS

Identify the date, parties to, and general terms of any agreement or arrangement with respect to: future employment; a leave of absence during the period of government service; continuation or deferral of payments by a former or current employer other than the U.S. Government; or continuing participation in an employee welfare or benefit plan maintained by a former employer.

Date	Parties To	Terms of Agreement
	N/A	

GPO: 1998 46-260 (mac)

Use additional sheets if more space is required.

THOMAS M. BARRETT
5TH DISTRICT, WISCONSIN

COMMITTEE ON
BANKING AND
FINANCIAL SERVICES

GOVERNMENT REFORM
AND OVERSIGHT

RECEIVED
98 JUN 10 PM 12:01

HAND DELIVERED

1224 LONGWORTH OFFICE BUILDING
WASHINGTON, DC 20515
(202) 225-3571

135 WEST WELLS STREET
ROOM 618
MILWAUKEE, WI 53203
(414) 297-1331

Congress of the United States

House of Representatives

Washington, DC 20515–4905

June 10, 1998

(3)

The Honorable Robin H. Carle
Clerk of the House
U.S. House of Representatives
B-215 Longworth HOB
Washington, DC 20515

✓
MC

Dear Ms. Carle,

I am writing to amend my Financial Disclosure Statement for 1997.

Attached are additions to Schedule IV of the Financial Disclosure Form.

Also, on Schedule V the amount of liability should be marked in column C and not column B.

Finally, as a point of clarification, several stocks purchased in 1997 were not reflected on Schedule III because they generated no income in 1997. These stocks are:

Boise Cascade Office Products
Cole Taylor Financial Group
St. Jude Medical Inc.
Danka Business Systems.

Thank you for your attention to this matter.

Sincerely,

Tom Barrett
Member of Congress

TB:jl

PRINTED ON RECYCLED PAPER

Thomas M. Barrett

Name Thomas M. Barrett | Page 7A of 11

SCHEDULE IV — TRANSACTIONS

Report any purchase, sale, or exchange by you, your spouse, or dependent child during the reporting year of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child, or the purchase or sale of your personal residence, unless it is rented out.

SP, DC, JT	Asset	Type of Transaction: PURCHASE	SALE	EXCHANGE	Date (MO/DAY/YR)	Amount of Transaction: B ($1,001–$15,000)	C ($15,001–$50,000)	D ($50,001–$100,000)	E ($100,001–$250,000)	F ($250,001–$500,000)	G ($500,001–$1,000,000)	H ($1,000,001–$5,000,000)	I ($5,000,001–$25,000,000)	J ($25,000,001–$50,000,000)	K (Over $50,000,000)
SP	*Example* Mega Corporation Common Stock	X			10-12-97		X								
	DFA US 9-10 Small Co. Dfrd. Comp.	x			6-30-97	x									
	20th Century Select Dfrd. Comp.		x		6-30-97		x								
	20th Century Growth Dfrd. Comp.		x		6-30-97		x								
	Vanguard Inst. Index-Dfrd. Comp.	x			6-30-97		x								
	Janus Fund-Dfrd. Comp.	x			6-30-97		x								
	Fidelity Contrafund-Dfrd. Comp.	x			6-30-97		x								
	Great West Life-Dfrd. Comp.		x		6-30-97	x									
	American Funds Group Mutual Fund	x			1-13-97	x									
	Hughes Supply, Inc.	x			1-23-97	x									

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UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1997

FORM A

For use by Members, officers, and employees

93 MAY 15 AM 10:23

WILLIAM E. BARRETT
(Full Name)

505 W. 17TH STREET
(Mailing Address)

(308) 324-6044
Daytime Telephone

LEXINGTON, NE 68850

MC (10)
(Office Use Only)

Filer Status

[X] Member of the U.S. House of Representatives — State NEBRASKA District #3

[ ] Officer or Employee — Employing Office

Report Type

[X] Annual (May 15)

[ ] Amendment

[ ] Termination — Termination Date

A *$200 penalty* shall be assessed against anyone who files more than 30 days late.

PRELIMINARY INFORMATION — ANSWER EACH OF THESE QUESTIONS

I. Did you or your spouse have "earned" income (e.g., salaries or fees) of $200 or more from any source in the reporting period? **If yes, complete and attach Schedule I.** — Yes [ ] No [X]

II. Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? **If yes, complete and attach Schedule II.** — Yes [ ] No [X]

III. Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? **If yes, complete and attach Schedule III.** — Yes [X] No [ ]

IV. Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset worth more than $1,000 in the reporting period? **If yes, complete and attach Schedule IV.** — Yes [X] No [ ]

V. Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? **If yes, complete and attach Schedule V.** — Yes [X] No [ ]

VI. Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $250 and not otherwise exempt)? **If yes, complete and attach Schedule VI.** — Yes [ ] No [X]

VII. Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $250 from one source)? **If yes, complete and attach Schedule VII.** — Yes [ ] No [X]

VIII. Did you hold any reportable positions on or before the date of filing in the current calendar year? **If yes, complete and attach Schedule VIII** — Yes [X] No [ ]

IX. Did you have any reportable agreement or arrangement with an outside entity? **If yes, complete and attach Schedule IX.** — Yes [ ] No [X]

Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION — ANSWER EACH OF THESE QUESTIONS

TRUSTS—Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child? — Yes [ ] No [X]

EXEMPTION—Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption? — Yes [ ] No [X]

CERTIFICATION — THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended. The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct or its designee. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil penalties and criminal sanctions (*See* 5 U.S.C. app. 4, §104 and 18 U.S.C. §1001)

SIGNATURE OF REPORTING INDIVIDUAL — Wm E. Barrett

DATE (Month/Day/Year) — 5/14/98

201

Name WILLIAM E. BARRETT	Page 2 of 10

SCHEDULE I — EARNED INCOME

List the source, type, and amount of earned income from any source (other than the filer's current employment by the U.S. Government) totalling $200 or more during the preceding calendar year. For a spouse, list the source and amount of any honoraria; list only the source for other spouse earned income exceeding $1,000.

	Source	Type	Amount
Examples	Keene State	Approved Teaching Fee	$6,000
	State of Maryland	Legislative Pension	$9,000
	Civil War Roundtable (Oct 2nd)	Spouse Speech	$1,000
	Ontario County Board of Education	Spouse Salary	NA

For payments to charity in lieu of honoraria, use Schedule II.

Name WILLIAM E. BARRETT | Page 3 of 10

SCHEDULE II — PAYMENTS IN LIEU OF HONORARIA MADE TO CHARITY

List the source, activity (i e , speech, appearance, or article), date, and amount of any payment made by the sponsor of an event to a charitable organization in lieu of an honorarium. A separate confidential list of charities receiving such payments must be filed directly with the Committee on Standards of Official Conduct. An envelope for transmitting the list is included in each Member's filing package.

	Source	Activity	Date	Amount
Examples	Association of American Associations, Wash , D C	Speech	Feb 2, 1997	$2 000
	XYZ Magazine	Article	Aug 13, 1997	$500

This page may be copied if more space is required.

Name WILLIAM E. BARRETT | Page 4 of 10

SCHEDULE III — ASSETS AND "UNEARNED" INCOME

BLOCK A — Asset and/or Income Source

Identify (a) each asset held for investment or production of income with a fair market value exceeding $1,000 at the end of the reporting year, and (b) any other asset or source of income which generated more than $200 in "unearned" income during the year. For rental property or land, provide an address. Provide full names of any mutual funds. For an IRA or retirement plan that is *self-directed*, list the underlying assets worth more than $1,000. For an IRA or retirement plan that is not self-directed, name the institution holding the account.

Exclude: Your personal residence(s) (unless there is rental income), any debt owed to you by your spouse, or by your or your spouse's child, parent, or sibling; any deposits totalling $5,000 or less in personal savings accounts; any financial interests in or income derived from U.S. Government retirement programs.

If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC) or is jointly held (JT) in the optional column on the far left.

BLOCK B — Value of Asset

at close of reporting year
If you use a valuation method other than fair market value, please specify the method used. If an asset was sold and is included only because it generated income, the value should be "None."

BLOCK C — Type of Income

BLOCK D — Amount of Income

For IRA's and retirement plans that are *not* self-directed, you may write in "NA" for income.

BLOCK E — Transaction

Indicate if asset was purchased (P), sold (S), or exchanged (E) in reporting year

	BLOCK A	BLOCK B: A None	B $1 – $1,000	C $1,001 – $15,000	$15,001 – $50,000	E $50,001 – $100,000	F $100,001 – $250,000	G $250,001 – $500,000	H $500,001 – $1,000,000	I $1,000,001 – $5,000,000	J $5,000,001 – $25,000,000	K $25,000,001 – $50,000,000	L Over $50,000,000	BLOCK C: DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Type of Income (Specify. For Example: Partnership Income or Farm Income)	BLOCK D: I None	II $1 – $200	III $201 – $1,000	IV $1,001 – $2,500	V $2,501 – $5,000	VI $5,001 – $15,000	VII $15,001 – $50,000	VIII $50,001 – $100,000	IX $100,001 – $1,000,000	X $1,000,001 – $5,000,000	XI Over $5,000,000	BLOCK E: P S E
SP																																	
DC	*Examples*		Indefinite											X						Royalties												P
JT																X																	
	COMMERCIAL LOT, 9TH & LINCOLN LEXINGTON, NE 68850				X																												
	COTTONWOOD NORTH (50% OF CORP) 2100 N. ADAMS, LEXINGTON, NE								X						X												X					
	BARRETT-HOUSEL INS (56% OF CORP) LEXINGTON, NE 68850						X								X	X	X										X					

For additional assets and unearned income, use next page.

SCHEDULE III — ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Name WILLIAM E. BARRETT | Page 5 of 10

SP. DC JT	BLOCK A Asset and/or Income Source	BLOCK B Year-End Value of Asset: A None	B $1 – $1,000	C $1,001 – $15,000	D $15,001 – $50,000	E $50,001 – $100,000	F $100,001 – $250,000	G $250,001 – $500,000	H $500,001 – $1,000,000	I $1,000,001 – $5,000,000	J $5,000,001 – $25,000,000	K $25,000,001 – $50,000,000	L Over $50,000,000	BLOCK C Type of Income: DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Type of Income (Specify)	BLOCK D Amount of Income: I None	II $1 – $200	III $201 – $1,000	IV $1,001 – $2,500	V $2,501 – $5,000	VI $5,001 – $15,000	VII $15,001 – $50,000	VIII $50,001 – $100,000	IX $100,001 – $1,000,000	X $1,000,001 – $5,000,000	XI Over $5,000,000	BLOCK E Transaction: P, S, E
	S B MONEY FUND GOVT FUND			X										X								X										
	FIDELITY ADVISOR SER II GRTH			X										X			X							X								
	RIGGS NATIONAL		X													X							X									
	APPLIED MATERIALS, INC.				X									X							X											P
	FARMERS STATE BANK-STOCK			X										X											X							S
	METALCLAD CORP.		X											X							X											
	GENERAL MOTORS-STOCK		X											X								X										
	ZOOM TELEPHONICS, INC.		X											X							X											
	KANSAS NEBRASKA-STOCK		X											X								X										
	ELECTRONIC DATA SYSTEMS-STKX													X							X											S
	GM HUGHES ELECTRONIC-STK	X												X							X											S
	LEXINGTON, NE-BOND			X												X							X									
	NEBRASKA PUBLIC POWER-BOND			X												X							X									
	OMAHA PUBLIC POWER-BOND			X												X							X									
	INTEL CORP.-STOCK				X									X								X										
	LANCASTER, NE-BOND			X												X							X									
	AIM VALUE FUND			X										X								X										
	MCI CAPITAL			X												X						X										
	MCDONALDS CORP.			X										X								X										
	WASHINGTON MUTUAL			X										X								X										
	NEBRASKA INVESTMENT FINANCE BOND			X												X						X										P

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SCHEDULE III — ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Name WILLIAM E. BARRETT

SP. DO. IT	BLOCK A Asset and/or Income Source	BLOCK B Year-End Value of Asset												BLOCK C Type of Income							BLOCK D Amount of Income											BLOCK E Transaction
		A None	B $1 – $1,000	C $1,001 – $15,000	D $15,001 – $50,000	E $50,001 – $100,000	F $100,001 – $250,000	G $250,001 – $500,000	H $500,001 – $1,000,000	I $1,000,001 – $5,000,000	J $5,000,001 – $25,000,000	K $25,000,001 – $50,000,000	L Over $50,000,000	DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Type of Income (Specify)	I None	II $1 – $200	III $201 – $1,000	IV $1,001 – $2,500	V $2,501 – $5,000	VI $5,001 – $15,000	VII $15,001 – $50,000	VIII $50,001 – $100,000	IX $100,001 – $1,000,000	X $1,000,001 – $5,000,000	XI Over $5,000,000	P S E
	JOHNSON AND JOHNSON			X										X								X										P
	SOUTHERN CO CAP III			X										X							X											P
	First TR Target			X												X						X										P
	First TR Market			X												X						X										P
	Putnam Investments (IRA)			X												X								X								

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SCHEDULE IV — TRANSACTIONS

Name WILLIAM E. BARRETT | Page 1 of 10

Report any purchase, sale, or exchange by you, your spouse, or dependent child during the reporting year of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child, or the purchase or sale of your personal residence, unless it is rented out.

SP, DC, JT	Asset	Type of Transaction: PURCHASE	SALE	EXCHANGE	Date (MO/DAY/YR)	Amount of Transaction: B ($1,001–$15,000)	C ($15,001–$50,000)	D ($50,001–$100,000)	E ($100,001–$250,000)	F ($250,001–$500,000)	G ($500,001–$1,000,000)	H ($1,000,001–$5,000,000)	I ($5,000,001–$25,000,000)	J ($25,000,001–$50,000,000)	K (Over $50,000,000)
SP	*Example:* Mega Corporation Common Stock	X			10-12-97		X								
	FARMERS STATE BANK		X		02/01/97		X								
	ELECTRONIC DATA SYSTEMS		X		12/01/97	X									
	JOHNSON AND JOHNSON	X			07/15/97	X									
	SOUTHERN CO. CAP. III	X			06/08/97	X							·		
	Applied Materials, Inc.	X			12/10/97	X									
	First TR Target	X			02/20/97	X									
	First TR Market	X			09/05/97	X									
	NE Investment Finance Authority	X			05/01/97	X									
	Southern Co Cap III	X			06/19/97	X									
	GM Hughes Electronic		X		11/19/97	X									

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SCHEDULE V — LIABILITIES

Report liabilities of over $10,000 owed to any one creditor ***at any time*** during the reporting period by you, your spouse, or dependent child Mark the highest amount owed during the year. **Exclude:** Any mortgage on your personal residence (unless it is rented out), loans secured by automobiles, household furniture, or appliances, and liabilities owed to a spouse, or the child, parent, or sibling of you or your spouse Report ***revolving charge accounts*** only if the balance at the end of the reporting period exceeded $10,000

SP, DC, JT	Creditor	Type of Liability	Amount of Liability										
			B $10,001 – $15,000	C $15,001 – $50,000	D $50,001 – $100,000	E $100,001 – $250,000	F $250,001 – $500,000	G $500,001 – $1,000,000	H $1,000,001 – $5,000,000	I $5,000,001 – $25,000,000	J $25,000,001 – $50,000,000	K Over $50,000,000
	Example First Bank of Wilmington, Delaware	Mortgage on 123 Main St , Dover, Del				X						
	UNITED NEBRASKA BANK, LEXINGTON, NE	MORTGAGE ON COTTONWOOD APTS					X					

SCHEDULE VI — GIFTS

Report the source, a brief description, and the value of all gifts totalling more than $250 received by you, your spouse, or a dependent child from any source during the year

Exclude: Gifts from relatives, gifts of personal hospitality of an individual, local meals, and gifts to a spouse or dependent child that are totally independent of his or her relationship to you Gifts with a value of $100 or less need not be added towards the $250 disclosure threshold.

Note: The gift rule (House Rule 51) prohibits gifts except as specifically provided in the rule

Source	Description	Value
Example Mr Joseph H Smith, Anytown, Anystate	Silver Platter (determination on personal friendship received from Committee on Standards)	$270

Use additional sheets if more space is required.

Name	WILLIAM E. BARRETT	Page 9 of 10

SCHEDULE VII —TRAVEL PAYMENTS AND REIMBURSEMENTS

Identify the source and list travel itinerary, dates, and nature of expenses provided for travel and travel-related expenses totalling more than $250 received by you, your spouse, or a dependent child during the reporting period. Indicate whether a family member accompanied the traveler at the sponsor's expense, and the amount of time, if any, that was not at the sponsor's expense. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor.

Exclude: Travel-related expenses provided by federal, state, and local governments, or by a foreign government required to be separately reported under the Foreign Gifts and Decorations Act (5 U.S.C. § 7342); travel paid for by a Federal political committee; travel provided to a spouse or dependent child that is totally independent of his or her relationship to you.

Source	Date(s)	Point of Departure—Destination—Point of Return	Lodging? (Y/N)	Food? (Y/N)	Was a Family Member Included? (Y/N)	Any time not at sponsor's expense
Examples: Chicago Chamber of Commerce	Mar. 2	Wash., D.C.—Chicago—Wash., D.C.	N	N	N	N
Roycroft Corporation	Aug. 6–13	Wash., D.C.—Los Angeles—Cleveland	Y	Y	Y	4 Days
Lindsay Manufacturing	Jan 11-12	DC-Phoenix, AZ-DC	Y	Y	N	N
Aspen Institute	Mar 7-9	DC-Hershey, PA-DC	Y	Y	Y	N
Independent Bankers (IBAA)	April 17-18	DC-Colorado Springs-DC	Y	Y	N	Y

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SCHEDULE VIII — POSITIONS

Report all positions, compensated or uncompensated, held during the current calendar year as an officer, director, trustee of an organization, partner, proprietor, representative, employee, or consultant of any corporation, firm, partnership, or other business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States.

Exclude: Positions held in any religious, social, fraternal, or political entities; positions solely of an honorary nature; and positions listed on Schedule I.

Position	Name of Organization
TRUSTEE	HASTINGS COLLEGE, HASTINGS, NE (UNCOMPENSATED)

SCHEDULE IX — AGREEMENTS

Identify the date, parties to, and general terms of any agreement or arrangement with respect to: future employment; a leave of absence during the period of government service; continuation or deferral of payments by a former or current employer other than the U.S. Government; or continuing participation in an employee welfare or benefit plan maintained by a former employer.

Date	Parties To	Terms of Agreement

GPO 1998 46-260 (mac)

Use additional sheets if more space is required.

2458 RAYBURN BUILDING
WASHINGTON, DC 20515
(202) 225-4435

DISTRICT OFFICES
GRAND ISLAND OFFICE
312 WEST THIRD STREET
GRAND ISLAND, NE 68801
308 381 5555

SCOTTSBLUFF OFFICE
1517 AVENUE A
SCOTTSBLUFF, NE 69361
308 632 3333

Congress of the United States
House of Representatives
Washington, DC 20515–2703

BILL BARRETT
3D DISTRICT, NEBRASKA

COMMITTEE ON AGRICULTURE
GENERAL FARM COMMODITIES
CHAIRMAN
FORESTRY, RESOURCE CONSERVATION
AND RESEARCH

COMMITTEE ON EDUCATION
AND THE WORKFORCE
WORKFORCE PROTECTIONS
POSTSECONDARY EDUCATION,
TRAINING AND LIFELONG LEARNING

June 10, 1998

'98 JUN 10 PM 2:49

Robin H. Carle
Clerk of the House
US House of Representatives
Washington, DC 20515

HAND DELIVERED

Dear Ms. Carle:

Please accept this letter as notice of amendments to the Financial Disclosure statements I have filed for years 1994-1997.

First, Schedule III of my 1997 Financial Disclosure should be amended to indicate capital gains from the sale of two assets. In Block C, the capital gains box should be checked for both the Farmers State Bank stock and the Electronic Data Systems stock. In Block D, for the Farmers State Bank stock, please change the reported income to the category $15,001-$50,000. Also in Block D, for the Electronic Data Systems stock, please change the reported income to category $1,001-$2,500.

Second, for the Financial Disclosures I filed for years 1994 and 1995, the asset described as Home Federal IRAs/savings should have been described as Putnam Investments IRAs. This asset was inadvertently left off my 1996 disclosure.

I appreciated the expert and professional help I received from staff of the Committee on Standards of Official Conduct in making these corrections.

Sincerely,

BILL BARRETT
Member of Congress

BB:jf

PRINTED ON RECYCLED PAPER

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1997

FORM A
For use by Members, officers, and employees

93 MAY 15 PM 1:07

Dr. Roscoe G. Bartlett
(Full Name)

322 Cannon House Office Building
(Mailing Address)

Washington, DC 20515

Daytime Telephone
202-225-2721

MC (Office Use Only) (5)

Filer Status	[X]	Member of the U.S. House of Representatives	State MD District 6th	[ ]	Officer or Employee	Employing Office
Report Type	[X]	Annual (May 15)	[ ] Amendment	[ ]	Termination	Termination Date

A *$200 penalty* shall be assessed against anyone who files more than 30 days late.

PRELIMINARY INFORMATION — ANSWER EACH OF THESE QUESTIONS

I. Did you or your spouse have "earned" income (e.g., salaries or fees) of $200 or more from any source in the reporting period? **If yes, complete and attach Schedule I.**	Yes [X]	No [ ]
II. Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? **If yes, complete and attach Schedule II.**	Yes [ ]	No [X]
III. Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? **If yes, complete and attach Schedule III.**	Yes [X]	No [ ]
IV. Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset worth more than $1,000 in the reporting period? **If yes, complete and attach Schedule IV.**	Yes [ ]	No [X]
V. Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? **If yes, complete and attach Schedule V.**	Yes [ ]	No [X]
VI. Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $250 and not otherwise exempt)? **If yes, complete and attach Schedule VI.**	Yes [ ]	No [X]
VII. Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $250 from one source)? **If yes, complete and attach Schedule VII.**	Yes [ ]	No [X]
VIII. Did you hold any reportable positions on or before the date of filing in the current calendar year? **If yes, complete and attach Schedule VIII.**	Yes [ ]	No [X]
IX. Did you have any reportable agreement or arrangement with an outside entity? **If yes, complete and attach Schedule IX.**	Yes [ ]	No [X]

Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION — ANSWER EACH OF THESE QUESTIONS

TRUSTS—Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child?	Yes [ ]	No [X]
EXEMPTION—Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption?	Yes [ ]	No [X]

CERTIFICATION — THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended. The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct or its designee. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil penalties and criminal sanctions (*See* 5 U.S.C. app. 4, §104 and 18 U.S.C. §1001)

SIGNATURE OF REPORTING INDIVIDUAL [signature] **DATE** (Month/Day/Year) 5-15-98

SCHEDULE I — EARNED INCOME

List the source, type, and amount of earned income from any source (other than the filer's current employment by the U.S. Government) totalling $200 or more during the preceding calendar year. For a spouse, list the source and amount of any honoraria; list only the source for other spouse earned income exceeding $1,000.

	Source	Type	Amount
Examples	Keene State	Approved Teaching Fee	$6,000
	State of Maryland	Legislative Pension	$9,000
	Civil War Roundtable (Oct. 2nd)	Spouse Speech	$1,000
	Ontario County Board of Education	Spouse Salary	NA
	Maryland State Retirement Systems	Pension	$13,657.50

For payments to charity in lieu of honoraria, use Schedule II.

Name Dr. Roscoe G. Bartlett | Page 3 of 5

SCHEDULE III — ASSETS AND "UNEARNED" INCOME

BLOCK A — Asset and/or Income Source

Identify (a) each asset held for investment or production of income with a fair market value exceeding $1,000 at the end of the reporting year, and (b) any other asset or source of income which generated more than $200 in "unearned" income during the year. For rental property or land, provide an address. Provide full names of any mutual funds. For an IRA or retirement plan that is *self-directed*, list the underlying assets worth more than $1,000. For an IRA or retirement plan that is not selfdirected, name the institution holding the account.

Exclude: Your personal residence(s) (unless there is rental income), any debt owed to you by your spouse, or by your or your spouse's child, parent, or sibling, any deposits totalling $5,000 or less in personal savings accounts, any financial interests in or income derived from U.S. Government retirement programs.

If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC) or is jointly held (JT), in the optional column on the far left.

BLOCK B — Value of Asset

at close of reporting year
If you use a valuation method other than fair market value, please specify the method used. If an asset was sold and is included only because it generated income, the value should be "None."

BLOCK C — Type of Income

BLOCK D — Amount of Income

For IRA's and retirement plans that are *not* self-directed, you may write in "NA" for income

BLOCK E — Transaction

Indicate if asset was purchased (P), sold (S), or exchanged (E) in reporting year

	BLOCK A	BLOCK B												BLOCK C							BLOCK D											BLOCK E
		A None	B $1 – $1,000	C $1,001 – $15,000	$15,001 – $50,000	E $50,001 – $100,000	F $100,001 – $250,000	G $250,001 – $500,000	H $500,001 – $1,000,000	I $1,000,001 – $5,000,000	J $5,000,001 – $25,000,000	K $25,000,001 – $50,000,000	L Over $50,000,000	DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Type of Income (Specify. For Example, Partnership Income or Farm Income)	I None	II $1 – $200	III $201 – $1,000	IV $1,001 – $2,500	V $2,501 – $5,000	VI $5,001 – $15,000	VII $15,001 – $50,000	VIII $50,001 – $100,000	IX $100,001 – $1,000,000	X $1,000,001 – $5,000,000	XI Over $5,000,000	
SP, DC, JT	*Examples*	SP	Mega Corp Stock				X							X										X								P
			Simon & Schuster	Indefinite																Royalties												
			1st Bank of Paducah KY accounts				X									X									X								
	4317 Buckeystown Pike 85.3 acres, Frederick Co. Maryland									X					X												X					
	4317 Buckeystown Pike 18.9 acres, Frederick Co., Maryland									X					X												X					
	Congressional Credit Union															X							X									
	Putnam Bonds			X												X					X											

For additional assets and unearned income, use next page.

SCHEDULE III — ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Name: Dr. Roscoe G. Bartlett — Page 4 of 5

	BLOCK A	BLOCK B — Year-End Value of Asset												BLOCK C — Type of Income							BLOCK D — Amount of Income											BLOCK E
SP. DC. JT	Asset and/or Income Source	A None	B $1 – $1,000	C $1,001 – $15,000	D $15,001 – $50,000	E $50,001 – $100,000	F $100,001 – $250,000	G $250,001 – $500,000	H $500,001 – $1,000,000	I $1,000,001 – $5,000,000	J $5,000,001 – $25,000,000	K $25,000,001 – $50,000,000	L Over $50,000,000	DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Type of Income (Specify)	I None	II $1 – $200	III $201 – $1,000	IV $1,001 – $2,500	V $2,501 – $5,000	VI $5,001 – $15,000	VII $15,001 – $50,000	VIII $50,001 – $100,000	IX $100,001 – $1,000,000	X $1,000,001 – $5,000,000	XI Over $5,000,000	P. S. E.
	Lot 49-Thurmont East .5 acre lot- Thurmont					X									property						X											
	Spruce Knob Lake Forest Service Rd. 153 acres Pocahontas Co. WV w/two houses						X								property						X											
	80 acres, Onaway, MD w/buildings -Six Mile Road					X									property						X											
	Mortgage, 8927 Mt. Tabor Rd., Middletown, Maryland Joe Bartlett					X										X										X						
	Loan to Campaign (Johns Hopkins Univ/APL Retirement Account was closed when loan was made in Sept/Oct '92- this money is part of the total loan)						X														X											
	Precious Metals				X																N/A											
	Frederick Co. National Bank-Money Market changed to checking Acct.			X												X						X										

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SCHEDULE IV — TRANSACTIONS

Name Dr. Roscoe G. Bartlett | Page 5 of 5

SP, DC, JT	Asset	Type of Transaction: PURCHASE	SALE	EXCHANGE	Date (MO/DAY/YR)	Amount of Transaction: B $1,001–$15,000	C $15,001–$50,000	D $50,001–$100,000	E $100,001–$250,000	F $250,001–$500,000	G $500,001–$1,000,000	H $1,000,001–$5,000,000	I $5,000,001–$25,000,000	J $25,000,001–$50,000,000	K Over $50,000,000
SP	*Example* Mega Corporation Common Stock	X			10–12–97		X								
	Johns Hopkins Univ/APL Retirement Account Closed Outstanding Loan to the campaign				9/10-1992		X								

Report any purchase, sale, or exchange by you, your spouse, or dependent child during the reporting year of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child, or the purchase or sale of your personal residence, unless it is rented out.

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UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1997

FORM A
For use by Members, officers, and employees

99 MAY 14 PM 4:08

OFFICE OF THE CLERK
U.S. HOUSE OF REPRESENTATIVES

HAND DELIVERED

(Office Use Only) 6

Joe Linus Barton (Full Name)
2264 Rayburn House Office Building (Mailing Address) (202)225-2002 Daytime Telephone
Washington, D.C. 20515

Filer Status
- [x] Member of the U.S. House of Representatives — State TX, District 6th
- [ ] Officer or Employee — Employing Office

Report Type
- [x] Annual (May 15)
- [ ] Amendment
- [ ] Termination — Termination Date

A *$200 penalty* shall be assessed against anyone who files more than 30 days late.

PRELIMINARY INFORMATION — ANSWER EACH OF THESE QUESTIONS

I. Did you or your spouse have "earned" income (e.g., salaries or fees) of $200 or more from any source in the reporting period? **If yes, complete and attach Schedule I.** — Yes [ ] No [x]

II. Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? **If yes, complete and attach Schedule II.** — Yes [x] No [ ]

III. Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? **If yes, complete and attach Schedule III.** — Yes [x] No [ ]

IV. Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset worth more than $1,000 in the reporting period? **If yes, complete and attach Schedule IV.** — Yes [ ] No [x]

V. Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? **If yes, complete and attach Schedule V.** — Yes [x] No [ ]

VI. Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $250 and not otherwise exempt)? **If yes, complete and attach Schedule VI.** — Yes [x] No [ ]

VII. Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $250 from one source)? **If yes, complete and attach Schedule VII.** — Yes [x] No [ ]

VIII. Did you hold any reportable positions on or before the date of filing in the current calendar year? **If yes, complete and attach Schedule VIII.** — Yes [ ] No [x]

IX. Did you have any reportable agreement or arrangement with an outside entity? **If yes, complete and attach Schedule IX.** — Yes [ ] No [x]

Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION — ANSWER EACH OF THESE QUESTIONS

TRUSTS—Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child? — Yes [ ] No [x]

EXEMPTION—Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption? — Yes [ ] No [x]

CERTIFICATION — THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended. The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct or its designee. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil penalties and criminal sanctions (*See* 5 U.S.C. app. 4, §104 and 18 U.S.C. §1001)

SIGNATURE OF REPORTING INDIVIDUAL — Joe Barton

DATE (Month/Day/Year) 3/14/98

Name Joe Barton	Page 2 of 6

SCHEDULE II — PAYMENTS IN LIEU OF HONORARIA MADE TO CHARITY

List the source, activity (i.e., speech, appearance, or article), date, and amount of any payment made by the sponsor of an event to a charitable organization in lieu of an honorarium. A separate confidential list of charities receiving such payments must be filed directly with the Committee on Standards of Official Conduct. An envelope for transmitting the list is included in each Member's filing package.

Source	Activity	Date	Amount
Examples Association of American Associations, Wash., D.C.	Speech	Feb. 2, 1997	$2,000
XYZ Magazine	Article	Aug. 13, 1997	$500
Cellular Telephone Industry Association, Dallas, Texas	Speech	May 2, 1997	$1,000
Metal Finishing Industry	Speech	September 15, 1997	$1,000

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SCHEDULE III — ASSETS AND "UNEARNED" INCOME

Name Joe Barton | Page 3 of 6

BLOCK A — Asset and/or Income Source

Identify (a) each asset held for investment or production of income with a fair market value exceeding $1,000 at the end of the reporting year, and (b) any other asset or source of income which generated more than $200 in "unearned" income during the year. For rental property or land, provide an address. Provide full names of any mutual funds. For an IRA or retirement plan that is *self-directed*, list the underlying assets worth more than $1,000. For an IRA or retirement plan that is not selfdirected, name the institution holding the account.

Exclude: Your personal residence(s) (unless there is rental income); any debt owed to you by your spouse, or by your or your spouse's child, parent, or sibling; any deposits totalling $5,000 or less in personal savings accounts; any financial interests in or income derived from U.S. Government retirement programs.

If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC) or is jointly held (JT), in the optional column on the far left.

BLOCK B — Value of Asset

at close of reporting year. If you use a valuation method other than fair market value, please specify the method used. If an asset was sold and is included only because it generated income, the value should be "None."

BLOCK C — Type of Income

BLOCK D — Amount of Income

For IRA's and retirement plans that are *not* self-directed, you may write in "NA" for income.

BLOCK E — Transaction

Indicate if asset was purchased (P), sold (S), or exchanged (E) in reporting year

				A None	B $1 – $1,000	C $1,001 – $15,000	E $15,001 – $50,000	F $50,001 – $100,000	G $100,001 – $250,000	H $250,001 – $500,000	I $500,001 – $1,000,000	J $1,000,001 – $5,000,000	K $5,000,001 – $25,000,000	L $25,000,001 – $50,000,000	Over $50,000,000	DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Type of Income (Specify. For Example, Partnership Income or Farm Income)	I None	II $1 – $200	III $201 – $1,000	IV $1,001 – $2,500	V $2,501 – $5,000	VI $5,001 – $15,000	VII $15,001 – $50,000	VIII $50,001 – $100,000	IX $100,001 – $1,000,000	X $1,000,001 – $5,000,000	XI Over $5,000,000	P, S, E
SP.		SP.	Mega Corp. Stock					X								X																		P
DC.	*Examples*		Simon & Schuster			Indefinite																												
JT			1st Bank of Paducah, KY accounts						X									X				Royalties						X						
JT	First National Bank - Ennis					X												X							X									
JT	Congressional Federal Credit Union				X													X					X										
JT	Congressional Federal Credit Union				X													X					X										
JT	Ennis Business Forms						X									X									X								
JT	Atlantic Richfield Comp Stock						X									X								X									
JT	Texas Utilities Co. Stock					X										X							X										

For additional assets and unearned income, use next page.

SCHEDULE III — ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Name: Joe Barton | Page 4 of 6

SP. DC. JT	BLOCK A Asset and/or Income Source	BLOCK B Year-End Value of Asset											BLOCK C Type of Income							BLOCK D Amount of Income										BLOCK E Transaction
		A None	B $1 – $1,000	C $1,001 – $15,000	D $15,001 – $50,000	E $50,001 – $100,000	F $100,001 – $250,000	G $250,001 – $500,000	H $500,001 – $1,000,000	I $1,000,001 – $5,000,000	J $5,000,001 – $25,000,000	K $25,000,001 – $50,000,000	L Over $50,000,000	DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Type of Income (Specify)	I None	II $1 – $200	III $201 – $1,000	IV $1,001 – $2,500	V $2,501 – $5,000	VI $5,001 – $15,000	VII $15,001 – $50,000	VIII $50,001 – $100,000	IX $100,001 – $1,000,000	X $1,000,001 – $5,000,000	XI Over $5,000,000	P, S, E
JT	Walmart Co Stock				X									X								X									
JT	Reebok Co Stock			X										X								X									
JT	Southwestern Bell Stock			X										X								X									
JT	Cripple Creek Condo				X										X										X						

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SCHEDULE V — LIABILITIES

Report liabilities of over $10,000 owed to any one creditor ***at any time*** during the reporting period by you, your spouse, or dependent child. Mark the highest amount owed during the year. **Exclude:** Any mortgage on your personal residence (unless it is rented out); loans secured by automobiles, household furniture, or appliances, and liabilities owed to a spouse, or the child, parent, or sibling of you or your spouse. Report ***revolving charge accounts*** only if the balance at the end of the reporting period exceeded $10,000

SP, DC, JT	Creditor	Type of Liability	Amount of Liability									
			B $10,001 – $15,000	C $15,001 – $50,000	D $50,001 – $100,000	E $100,001 – $250,000	F $250,001 – $500,000	G $500,001 – $1,000,000	H $1,000,001 – $5,000,000	I $5,000,001 – $25,000,000	J $25,000,001 – $50,000,000	K Over $50,000,000
Example:	First Bank of Wilmington, Delaware	Mortgage on 123 Main St., Dover, Del.				X						
JT	Liberty Lending Cincinnati/Wilmington Ohio	Mortgage on Cripple Creek Condo 906 University Oaks #16 College Station, Texas		X								

SCHEDULE VI — GIFTS

Report the source, a brief description, and the value of all gifts totalling more than $250 received by you, your spouse, or a dependent child from any source during the year.

Exclude: Gifts from relatives, gifts of personal hospitality of an individual, local meals, and gifts to a spouse or dependent child that are totally independent of his or her relationship to you. Gifts with a value of $100 or less need not be added towards the $250 disclosure threshold.

Note: The gift rule (House Rule 51) prohibits gifts except as specifically provided in the rule.

Source	Description	Value
Example: Mr. Joseph H. Smith, Anytown, Anystate	Silver Platter (determination on personal friendship received from Committee on Standards)	$270
Texas Society of Professional Engineers	The George Washington Citizen Award - received 10/13/97 in Arlington, Texas	$500

Use additional sheets if more space is required.

Name Joe Barton | Page 6 of 6

SCHEDULE VII —TRAVEL PAYMENTS AND REIMBURSEMENTS

Identify the source and list travel itinerary, dates, and nature of expenses provided for travel and travel-related expenses totalling more than $250 received by you, your spouse, or a dependent child during the reporting period. Indicate whether a family member accompanied the traveler at the sponsor's expense, and the amount of time, if any, that was not at the sponsor's expense. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor.

Exclude: Travel-related expenses provided by federal, state, and local governments, or by a foreign government required to be separately reported under the Foreign Gifts and Decorations Act (5 U.S.C. § 7342), travel paid for by a Federal political committee; travel provided to a spouse or dependent child that is totally independent of his or her relationship to you.

Source	Date(s)	Point of Departure—Destination—Point of Return	Lodging? (Y/N)	Food? (Y/N)	Was a Family Member Included? (Y/N)	Any time not at sponsor's expense
Examples						
Chicago Chamber of Commerce	Mar. 2	Wash., D.C —Chicago—Wash., D.C.	N	N	N	N
Roycroft Corporation	Aug. 6–13	Wash., D.C.—Los Angeles—Cleveland	Y	Y	Y	4 Days
New York Stock Exchange	1/27 - 1/28/97	Dallas - New York - Wash, D.C.	Y	Y	N	N
Anderson Consulting	2/1 - 2/3/97	Dallas - Reno - Dallas	Y	Y	Y	N
New Mexico Society of Professional Engineers	2/19/97	Dallas - Albuquerque - Dallas	N	Y	N	N
Zeus Development	3/3 - 3/4/97	Dallas - Houston	Y	Y	N	N
U.S. Mexico Chamber of Commerce	3/6 - 3/8/97	Wash, D.C. - Mexico City - Dallas	Y	Y	N	N
National Petroleum Refiners	3/17 - 3/18/97	Dallas - San Antonio - Wash, D.C.	Y	Y	N	N
Crown Show Management World Educational Congress For Laundering & Dry Cleaning	5/31 - 6/3/97	Houston - Las Vegas - Wash, D.C.	Y	Y	N	N
U.S. Mexico Chamber of Commerce	8/13 - 8/15/97	Dallas - Mexico City - Monterey - Dallas	Y	Y	Y	N
Dallas Chamber of Commerce	9/12 - 9/13/97	Dallas	Y	Y	Y	N
Republican Western Conference	10/3 - 10/4/97	Dallas - Reno - Dallas	Y	Y	N	N
Houston Surgical Society	12/15 - 12/16/97	Dallas - Houston - Dallas	Y	Y	N	N
Offshore Operators Committee	12/17/97	Dallas - New Orleans - Dallas	N	Y	N	N

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UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1997

FORM A
For use by Members, officers, and employees

CHARLES F. BASS
(Full Name)

P.O. Box 210
(Mailing Address)

603-924-3303/202-225-5206
Daytime Telephone

PETERBOROUGH NH 03458

MC
(Office Use Only)

Filer Status
- [X] Member of the U.S. House of Representatives — State N.H. District 02
- [ ] Officer or Employee — Employing Office

Report Type
- [X] Annual (May 15)
- [ ] Amendment
- [ ] Termination — Termination Date

A *$200 penalty* shall be assessed against anyone who files more than 30 days late.

PRELIMINARY INFORMATION — ANSWER EACH OF THESE QUESTIONS

I Did you or your spouse have "earned" income (e.g., salaries or fees) of $200 or more from any source in the reporting period? **If yes, complete and attach Schedule I.** — Yes [X] No [ ]

II Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? **If yes, complete and attach Schedule II.** — Yes [ ] No [X]

III Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? **If yes, complete and attach Schedule III.** — Yes [X] No [ ]

IV Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset worth more than $1,000 in the reporting period? **If yes, complete and attach Schedule IV.** — Yes [X] No [ ]

V Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? **If yes, complete and attach Schedule V.** — Yes [X] No [ ]

VI Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $250 and not otherwise exempt)? **If yes, complete and attach Schedule VI.** — Yes [ ] No [X]

VII Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $250 from one source)? **If yes, complete and attach Schedule VII.** — Yes [X] No [ ]

VIII Did you hold any reportable positions on or before the date of filing in the current calendar year? **If yes, complete and attach Schedule VIII.** — Yes [ ] No [X]

IX Did you have any reportable agreement or arrangement with an outside entity? **If yes, complete and attach Schedule IX.** — Yes [ ] No [X]

Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION — ANSWER EACH OF THESE QUESTIONS

TRUSTS—Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child? — Yes [ ] No [X]

EXEMPTION—Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption? — Yes [ ] No [X]

CERTIFICATION — THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended. The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct or its designee. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil penalties and criminal sanctions (*See* 5 U.S.C. app. 4, §104 and 18 U.S.C. §1001)

SIGNATURE OF REPORTING INDIVIDUAL: Charles F. Bass

DATE (Month/Day/Year): 05-13-98

SCHEDULE I — EARNED INCOME

List the source, type, and amount of earned income from any source (other than the filer's current employment by the U.S. Government) totalling $200 or more during the preceding calendar year. For a spouse, list the source and amount of any honoraria; list only the source for other spouse earned income exceeding $1,000.

Source	Type	Amount
Examples: Keene State	Approved Teaching Fee	$6,000
State of Maryland	Legislative Pension	$9,000
Civil War Roundtable (Oct. 2nd)	Spouse Speech	$1,000
Ontario County Board of Education	Spouse Salary	NA
HIGH STANDARD, INC	CONSULTING FEE	10,000.
COLUMBIA ARCHITECTURAL PRODUCTS, INC	CONSULTING FEE	10,000.

For payments to charity in lieu of honoraria, use Schedule II.

SCHEDULE III — ASSETS AND "UNEARNED" INCOME

Name | Page 3 of 6

BLOCK A — Asset and/or Income Source

Identify (a) each asset held for investment or production of income with a fair market value exceeding $1,000 at the end of the reporting year, and (b) any other asset or source of income which generated more than $200 in "unearned" income during the year. For rental property or land, provide an address. Provide full names of any mutual funds. For an IRA or retirement plan that is *self-directed*, list the underlying assets worth more than $1,000. For an IRA or retirement plan that is not self-directed, name the institution holding the account.

Exclude: Your personal residence(s) (unless there is rental income), any debt owed to you by your spouse, or by your or your spouse's child, parent, or sibling, any deposits totalling $5,000 or less in personal savings accounts, any financial interests in or income derived from U.S. Government retirement programs.

If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC) or is jointly held (JT), in the optional column on the far left.

BLOCK B — Value of Asset at close of reporting year. If you use a valuation method other than fair market value, please specify the method used. If an asset was sold and is included only because it generated income, the value should be "None."

BLOCK C — Type of Income

BLOCK D — Amount of Income For IRA's and retirement plans that are *not* self-directed, you may write in "NA" for income.

BLOCK E — Transaction Indicate if asset was purchased (P), sold (S), or exchanged (E) in reporting year.

BLOCK A				BLOCK B												BLOCK C							BLOCK D											BLOCK E
				A	B	C		E	F	G	H	I	J	K	L								I	II	III	IV	V	VI	VII	VIII	IX	X	XI	
				None	$1 – $1,000	$1,001 – $15,000	$15,001 – $50,000	$50,001 – $100,000	$100,001 – $250,000	$250,001 – $500,000	$500,001 – $1,000,000	$1,000,001 – $5,000,000	$5,000,001 – $25,000,000	$25,000,001 – $50,000,000	Over $50,000,000	DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Type of Income (Specify. For Example, Partnership Income or Farm Income)	None	$1 – $200	$201 – $1,000	$1,001 – $2,500	$2,501 – $5,000	$5,001 – $15,000	$15,001 – $50,000	$50,001 – $100,000	$100,001 – $1,000,000	$1,000,001 – $5,000,000	Over $5,000,000	P, S, E
SP, DC, JT		Examples	SP	Mega Corp Stock				X								X																		P
				Simon & Schuster			Indefinite															Royalties												
				1st Bank of Paducah KY accounts					X									X									X							
	BASS PARTNERS											X					X	X									X						
	IRA-AGEDWARDS							X																									
	POBOX 353, GREENFIELD, MA																																
	NUCOR CORP						X								X								X	X									
	LANCASTER BANK CD						X											X							X								
	GRANITE BANK CHECKING					X												X					X										

For additional assets and unearned income, use next page.

SCHEDULE III — ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Name	Page 4 of 6

	BLOCK A	BLOCK B												BLOCK C							BLOCK D										BLOCK E
	Asset and/or Income Source	Year-End Value of Asset												Type of Income							Amount of Income										Transaction
SP, DC, JT		A None	B $1 – $1,000	C $1,001 – $15,000	D $15,001 – $50,000	E $50,001 – $100,000	F $100,001 – $250,000	G $250,001 – $500,000	H $500,001 – $1,000,000	I $1,000,001 – $5,000,000	J $5,000,001 – $25,000,000	K $25,000,001 – $50,000,000	L Over $50,000,000	DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Type of Income (Specify)	I None	II $1 – $200	III $201 – $1,000	IV $1,001 – $2,500	V $2,501 – $5,000	VI $5,001 – $15,000	VII $15,001 – $50,000	VIII $50,001 – $100,000	IX $100,001 – $1,000,000	X $1,000,001 – $5,000,000	XI Over $5,000,000	P, S, E
	REAL ESTATE, EDG., MA					X																								
	COLUMBIA ARCH. PROD STOCK						X																							
	LANCASTER BANK STOCK				X									X								X	X							
	PRIMARY BANK SAVINGS ACCT				X											X						X	X							
	PRIMARY BANK STOCK			X										1							1									
	AG EDWARDS CASH ACCT			X												X						X								
	PATMAN FED. CREDIT UNION			X												X						X								
JT	MILFORD RECAP LTD. PTNRSHIP				X																									
SP	IRA, AG EDWARDS				X																									
SP	PRIMARY BANK				X											X							X							
	HIGH STANDARD, INC INST. LOAN				X											X								X						

This page may be copied if more space is required.

SCHEDULE V — LIABILITIES

Report liabilities of over $10,000 owed to any one creditor ***at any time*** during the reporting period by you, your spouse, or dependent child. Mark the highest amount owed during the year. **Exclude:** Any mortgage on your personal residence (unless it is rented out), loans secured by automobiles, household furniture, or appliances, and liabilities owed to a spouse, or the child, parent, or sibling of you or your spouse. Report ***revolving charge accounts*** only if the balance at the end of the reporting period exceeded $10,000.[1]

SP, DC, JT	Creditor	Type of Liability	Amount of Liability									
			B $10,001–$15,000	C $15,001–$50,000	D $50,001–$100,000	E $100,001–$250,000	F $250,001–$500,000	G $500,001–$1,000,000	H $1,000,001–$5,000,000	I $5,000,001–$25,000,000	J $25,000,001–$50,000,000	K Over $50,000,000
	Example First Bank of Wilmington, Delaware	Mortgage on 123 Main St., Dover, Del				X						
	CITICORP MORTGAGE	MORTGAGE: 1629 21st ST, WASHINGTON, D.C (BASS PARTNERS)					X					

SCHEDULE VI — GIFTS

Report the source, a brief description, and the value of all gifts totalling more than $250 received by you, your spouse, or a dependent child from any source during the year.

Exclude: Gifts from relatives, gifts of personal hospitality of an individual, local meals, and gifts to a spouse or dependent child that are totally independent of his or her relationship to you. Gifts with a value of $100 or less need not be added towards the $250 disclosure threshold.

Note: The gift rule (House Rule 51) prohibits gifts except as specifically provided in the rule.

Source	Description	Value
Example Mr. Joseph H. Smith, Anytown, Anystate	Silver Platter (determination on personal friendship received from Committee on Standards)	$270

Use additional sheets if more space is required.

SCHEDULE VII —TRAVEL PAYMENTS AND REIMBURSEMENTS

Identify the source and list travel itinerary, dates, and nature of expenses provided for travel and travel-related expenses totalling more than $250 received by you, your spouse, or a dependent child during the reporting period. Indicate whether a family member accompanied the traveler at the sponsor's expense, and the amount of time, if any, that was not at the sponsor's expense. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor.

Exclude: Travel-related expenses provided by federal, state, and local governments, or by a foreign government required to be separately reported under the Foreign Gifts and Decorations Act (5 U.S.C. § 7342); travel paid for by a Federal political committee; travel provided to a spouse or dependent child that is totally independent of his or her relationship to you.

	Source	Date(s)	Point of Departure—Destination—Point of Return	Lodging? (Y/N)	Food? (Y/N)	Was a Family Member Included? (Y/N)	Any time not at sponsor's expense
Examples	Chicago Chamber of Commerce	Mar. 2	Wash., D.C.—Chicago—Wash., D.C.	N	N	N	N
	Roycroft Corporation	Aug. 6–13	Wash., D.C.—Los Angeles—Cleveland	Y	Y	Y	4 Days
	INDEPENDENT BAKERS ASSN (SPEECH)	FEB 25, 24, 1997	WASH, DC - BOCA RATON FL WASH DC	Y	Y	N	N
	BIPARTISAN CONGRESSIONAL RETREAT	MAR 7-9, 1997	WASH, DC. - HERSHEY, PA - WASH DC	Y	Y	Y	N
	TEXTRON, INC (TOUR OF CESSNA & BEECHCRAFT FACILITIES)	JUL 20-21, 1997	WASH, DC - WICHITA, KS - WASH DC	Y	Y	N	N
	WESTERN LEGISLATIVE ROUNDUP (REVIEW OF LAND USE PRACTICES)	AUG 28-31, 1997	WASH, DC - BOISE, ID. - LOCAL - WASH, DC,	Y	Y	Y	N

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CHARLES F. BASS
2D DISTRICT, NEW HAMPSHIRE

218 CANNON BUILDING
WASHINGTON, DC 20515-2902
(202) 225-5206
internet: cbass@hr.house.gov

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Congress of the United States
House of Representatives

COMMITTEE ON THE BUDGET

COMMITTEE ON
TRANSPORTATION AND INFRASTRUCTURE
SUBCOMMITTEE ON AVIATION
SUBCOMMITTEE ON SURFACE TRANSPORTATION

PERMANENT SELECT
COMMITTEE ON INTELLIGENCE
SUBCOMMITTEE ON HUMAN INTELLIGENCE
ANALYSIS, AND COUNTER INTELLIGENCE

June 10, 1998

The Honorable Robin H. Carle
Clerk of the House
Legislative Resource Center
B106 Cannon Building
Washington, D.C. 20515

1
MC

Dear Ms. Carle

While compiling my FY1997 Financial Disclosure statement, it came to my attention that an item was inadvertently omitted from my FY1996 Financial Disclosure. I would like to take this opportunity to amend my FY1996 Financial Disclosure statement

The Schedule III "Assets and 'Unearned' Income" worksheet should have included the following item: "Lancaster Bank Stock". The stock should be listed as having a year-end value in category D, $15,001 - $50,000; as yielding dividends income; and as yielding income in the category III range of $201 - $1,000.

Thank you for your assistance with this matter. Please contact Annette O'Connor at 225-5206 with any questions

Sincerely,

Charles F. Bass

Charles F. Bass
Member of Congress

CFB:mao

REPLY TO
142 NORTH MAIN STREET
CONCORD, NH 03301
(603) 225-5241

170 MAIN STREET
NASHUA, NH 03060
(603) 889-8772

69 MAIN STREET
LITTLETON, NH 03561
(603) 444-1271

ONE WEST STREET
SUITE 208
KEENE, NH 03431
(603) 358-4094

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1997

FORM A
For use by Members, officers, and employees

98 MAY 11 AM 11:00

HERBERT HARVELL BATEMAN
(Full Name)

2350 Rayburn HOB Washington, D.C. 20515
(Mailing Address)

202/225-4261
Daytime Telephone

HAND DELIVERED (9)

MC
(Office Use Only)

Filer Status
[X] Member of the U S House of Representatives — State: VA District: 1st
[ ] Officer or Employee — Employing Office

Report Type
[X] Annual (May 15)
[ ] Amendment
[ ] Termination — Termination Date

A *$200 penalty* shall be assessed against anyone who files more than 30 days late.

PRELIMINARY INFORMATION — ANSWER EACH OF THESE QUESTIONS

I Did you or your spouse have "earned" income (e.g., salaries or fees) of $200 or more from any source in the reporting period? **If yes, complete and attach Schedule I.** — Yes [X] No [ ]

II Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? **If yes, complete and attach Schedule II.** — Yes [X] No [ ]

III Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? **If yes, complete and attach Schedule III.** — Yes [X] No [ ]

IV Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset worth more than $1,000 in the reporting period? **If yes, complete and attach Schedule IV.** — Yes [X] No [ ]

V Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? **If yes, complete and attach Schedule V.** — Yes [ ] No [X]

VI Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i e , aggregating more than $250 and not otherwise exempt)? **If yes, complete and attach Schedule VI** — Yes [ ] No [X]

VII Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $250 from one source)? **If yes, complete and attach Schedule VII.** — Yes [X] No [ ]

VIII Did you hold any reportable positions on or before the date of filing in the current calendar year? **If yes, complete and attach Schedule VIII** — Yes [ ] No [X]

IX Did you have any reportable agreement or arrangement with an outside entity? **If yes, complete and attach Schedule IX.** — Yes [ ] No [X]

Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION — ANSWER EACH OF THESE QUESTIONS

TRUSTS—Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child? — Yes [ ] No [X]

EXEMPTION—Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption? — Yes [ ] No [X]

CERTIFICATION — THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct or its designee. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil penalties and criminal sanctions (*See* 5 U S C app 4, §104 and 18 U S C §1001).

SIGNATURE OF REPORTING INDIVIDUAL — DATE (Month/Day/Year): 5/7/98

Name Herbert Harvell Bateman	Page 2 of 9

SCHEDULE I — EARNED INCOME

List the source, type, and amount of earned income from any source (other than the filer's current employment by the U.S. Government) totalling $200 or more during the preceding calendar year. For a spouse, list the source and amount of any honoraria; list only the source for other spouse earned income exceeding $1,000.

	Source	Type	Amount
Examples:	Keene State	Approved Teaching Fee	$6,000
	State of Maryland	Legislative Pension	$9,000
	Civil War Roundtable (Oct 2nd)	Spouse Speech	$1,000
	Ontario County Board of Education	Spouse Salary	NA
	Commonwealth of Virginia	Legislative Pension	2847.76
	Commonwealth of Virginia--Alternate Health Insurance Credit	Alternate Health Insurance Credit	554.70

For payments to charity in lieu of honoraria, use Schedule II.

SCHEDULE II — PAYMENTS IN LIEU OF HONORARIA MADE TO CHARITY

List the source, activity (i.e., speech, appearance, or article), date, and amount of any payment made by the sponsor of an event to a charitable organization in lieu of an honorarium. A separate confidential list of charities receiving such payments must be filed directly with the Committee on Standards of Official Conduct. An envelope for transmitting the list is included in each Member's filing package.

Source	Activity	Date	Amount
Examples: Association of American Associations, Wash., D.C. / XYZ Magazine	Speech / Article	Feb 2, 1997 / Aug 13, 1997	$2,000 / $500
Armed Forces Marketing Council, Fairfax, VA	Speech--Q&A	March 4, 1997	$1,000

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SCHEDULE III — ASSETS AND "UNEARNED" INCOME

Name Herbert Harvell Bateman | Page 4 of 9

BLOCK A — Asset and/or Income Source

Identify (a) each asset held for investment or production of income with a fair market value exceeding $1,000 at the end of the reporting year, and (b) any other asset or source of income which generated more than $200 in "unearned" income during the year. For rental property or land, provide an address. Provide full names of any mutual funds. For an IRA or retirement plan that is *self-directed*, list the underlying assets worth more than $1,000. For an IRA or retirement plan that is not selfdirected, name the institution holding the account.

Exclude: Your personal residence(s) (unless there is rental income), any debt owed to you by your spouse, or by your or your spouse's child, parent, or sibling; any deposits totalling $5,000 or less in personal savings accounts, any financial interests in or income derived from U.S. Government retirement programs.

If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC) or is jointly held (JT), in the optional column on the far left.

BLOCK B — Value of Asset

at close of reporting year. If you use a valuation method other than fair market value, please specify the method used. If an asset was sold and is included only because it generated income, the value should be "None."

BLOCK C — Type of Income

BLOCK D — Amount of Income

For IRA's and retirement plans that are *not* self-directed, you may write in "NA" for income.

BLOCK E — Transaction

Indicate if asset was purchased (P), sold (S), or exchanged (E) in reporting year

	BLOCK A	BLOCK B												BLOCK C							BLOCK D										BLOCK E
		A None	B $1 – $1,000	C $1,001 – $15,000	$15,001 – $50,000	E $50,001 – $100,000	F $100,001 – $250,000	G $250,001 – $500,000	H $500,001 – $1,000,000	I $1,000,001 – $5,000,000	J $5,000,001 – $25,000,000	K $25,000,001 – $50,000,000	L Over $50,000,000	DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Type of Income (Specify For Example Partnership Income or Farm Income)	I None	II $1 – $200	III $201 – $1,000	IV $1,001 – $2,500	V $2,501 – $5,000	VI $5,001 – $15,000	VII $15,001 – $50,000	VIII $50,001 – $100,000	IX $100,001 – $1,000,000	X $1,000,001 – $5,000,000	XI Over $5,000,000	P, S, E
SP, DC, JT	*Examples* SP Mega Corp Stock					X								X																	P
	DC Simon & Schuster			Indefinite																Royalties								X			
	JT 1st Bank of Paducah, KY accounts						X									X									X						
	Hampton, VA																														
JT	.70 acre commercial lot							X						X											X						
	Arlington, VA																														
JT	Parking space, Horizon House			X											X								X								
	Legg Mason Value Trust Mutual Fund					X								X			X								X						
	Legg Mason High Yield Bond Portfolio				X											X								X							
	Templeton World Fund Mutual Fund				X									X			X							X							
	Templeton World Fund Retirement Acct							X						X			X									X					

For additional assets and unearned Income, use next page.

SCHEDULE III — ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Name Herbert Harvell Bateman | Page 5 of 9

SP, DC, JT	BLOCK A: Asset and/or Income Source	BLOCK B: Year-End Value of Asset — A: None	B: $1 – $1,000	C: $1,001 – $15,000	D: $15,001 – $50,000	E: $50,001 – $100,000	F: $100,001 – $250,000	G: $250,001 – $500,000	H: $500,001 – $1,000,000	I: $1,000,001 – $5,000,000	J: $5,000,001 – $25,000,000	K: $25,000,001 – $50,000,000	L: Over $50,000,000	BLOCK C: Type of Income — DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Type of Income (Specify)	BLOCK D: Amount of Income — I: None	II: $1 – $200	III: $201 – $1,000	IV: $1,001 – $2,500	V: $2,501 – $5,000	VI: $5,001 – $15,000	VII: $15,001 – $50,000	VIII: $50,001 – $100,000	IX: $100,001 – $1,000,000	X: $1,000,001 – $5,000,000	XI: Over $5,000,000	BLOCK E: Transaction — P, S, E
SP	Templeton World Mutual Fund IRA				X									X			X								X							
	Avalon Properties --REIT			X										X								X										
	USF&G			X										X								X										
	CBS (formerly Westinghouse)			X										X								X										
	Smithfield Food					X																											
JT	Jefferson Natl Bank Checking Acct				X											X								X									
	Wachovia Bank (formerly Jeff Stock Natl)			X										X								X										
	Crestar			X										X								X										
	Nations Bank--checking acct			X												X						X										
SP	Prudential insurance													X								X										
	Cong Federal Credit Union		X													X						X										
	Zweig Strategy Fund Classic			X										X			X							X								
	Camden Prop Trust--REIT			X										X								X										
	VA Dept Taxation																							X								Tax Refund
	Computer Invest Services Mun Bond Fund				X												X						X									

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SCHEDULE IV — TRANSACTIONS

Name Herbert Harvell Bateman | Page 6 of 9

Report any purchase, sale, or exchange by you, your spouse, or dependent child during the reporting year of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child, or the purchase or sale of your personal residence, unless it is rented out.

SP, DC, JT	Asset	Type of Transaction: PURCHASE	SALE	EXCHANGE	Date (MO/DAY/YR)	Amount of Transaction: B ($1,001–$15,000)	C ($15,001–$50,000)	D ($50,001–$100,000)	E ($100,001–$250,000)	F ($250,001–$500,000)	G ($500,001–$1,000,000)	H ($1,000,001–$5,000,000)	I ($5,000,001–$25,000,000)	J ($25,000,001–$50,000,000)	K (Over $50,000,000)
SP	*Example* Mega Corporation Common Stock	X			10-12-97		X								
JT	Compulife Investor Services, Inc.,Muncipal Bond Mutual Fund	X			6/20/97		X								
	Zweig Strategy Fund (Reinvested Div)	X			Various dates	X									
	Templeton World Fund Retirement Accounts (Reinvested dividends)	X			Various dates			X							
	Templeton World Fund	X			Various dates	X									
	Legg Mason High Yield	X			Various dates	X									
	Legg Mason Value Trust	X			Various dates	X									
	Wachovia Bank (Dividend Reinvestment)	X			Various dates	X									
SP	Templeton World Fund Retirement Account	X			Various dates	X									
	Smithfield Food Inc Stock		X		12/30/97	X									

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SCHEDULE V — LIABILITIES

Report liabilities of over $10,000 owed to any one creditor ***at any time*** during the reporting period by you, your spouse, or dependent child. Mark the highest amount owed during the year. **Exclude:** Any mortgage on your personal residence (unless it is rented out), loans secured by automobiles, household furniture, or appliances, and liabilities owed to a spouse, or the child, parent, or sibling of you or your spouse. Report ***revolving charge accounts*** only if the balance at the end of the reporting period exceeded $10,000.

SP, DC, JT	Creditor	Type of Liability	Amount of Liability										
			B $10,001–$15,000	C $15,001–$50,000	D $50,001–$100,000	E $100,001–$250,000	F $250,001–$500,000	G $500,001–$1,000,000	H $1,000,001–$5,000,000	I $5,000,001–$25,000,000	J $25,000,001–$50,000,000	K Over $50,000,000
Example	First Bank of Wilmington, Delaware	Mortgage on 123 Main St., Dover, Del				x						
	NONE OVER $10,000											

SCHEDULE VI — GIFTS

Report the source, a brief description, and the value of all gifts totalling more than $250 received by you, your spouse, or a dependent child from any source during the year.

Exclude: Gifts from relatives, gifts of personal hospitality of an individual, local meals, and gifts to a spouse or dependent child that are totally independent of his or her relationship to you. Gifts with a value of $100 or less need not be added towards the $250 disclosure threshold.

Note: The gift rule (House Rule 51) prohibits gifts except as specifically provided in the rule.

Source	Description	Value
Example Mr. Joseph H. Smith, Anytown, Anystate	Silver Platter (determination on personal friendship received from Committee on Standards)	$270
NONE		

Use additional sheets if more space is required.

SCHEDULE VII —TRAVEL PAYMENTS AND REIMBURSEMENTS

Identify the source and list travel itinerary, dates, and nature of expenses provided for travel and travel-related expenses totalling more than $250 received by you, your spouse, or a dependent child during the reporting period. Indicate whether a family member accompanied the traveler at the sponsor's expense, and the amount of time, if any, that was not at the sponsor's expense. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor.

Exclude: Travel-related expenses provided by federal, state, and local governments, or by a foreign government required to be separately reported under the Foreign Gifts and Decorations Act (5 U.S.C § 7342); travel paid for by a Federal political committee, travel provided to a spouse or dependent child that is totally independent of his or her relationship to you.

Source	Date(s)	Point of Departure—Destination—Point of Return	Lodging? (Y/N)	Food? (Y/N)	Was a Family Member Included? (Y/N)	Any time not at sponsor's expense
Examples: Chicago Chamber of Commerce	Mar. 2	Wash., D.C.—Chicago—Wash., D.C.	N	N	N	N
Roycroft Corporation	Aug. 6–13	Wash., D.C.—Los Angeles—Cleveland	Y	Y	Y	4 Days
Aspen Institute	3/7-3/9/97	Wash.,DC-Hershey,PA,-Wash.,DC	Y	Y	Spouse	NO
The Brookings Institution	8/23-8/29/97	Wash.,DC-Tokyo-Wash.,DC	Y	Y	Spouse	NO
American Crop Protection Assn	9/26-9/28/97	Wash.,DC-White Sulphur Springs,W,VA-Wash.,DC	Y	Y	Spouse	No
College of William & Mary	5/10-5/11/97	Wash.,DC-Williamsburg,VA-Wash.,DC	Y	Y	Spouse	No

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SCHEDULE VIII — POSITIONS

Report all positions, compensated or uncompensated, held during the current calendar year as an officer, director, trustee of an organization, partner, proprietor, representative, employee, or consultant of any corporation, firm, partnership, or other business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States.

Exclude: Positions held in any religious, social, fraternal, or political entities, positions solely of an honorary nature, and positions listed on Schedule I.

Position	Name of Organization
	NONE

SCHEDULE IX — AGREEMENTS

Identify the date, parties to, and general terms of any agreement or arrangement with respect to: future employment, a leave of absence during the period of government service; continuation or deferral of payments by a former or current employer other than the U.S. Government, or continuing participation in an employee welfare or benefit plan maintained by a former employer.

Date	Parties To	Terms of Agreement
	NONE	

GPO 1998 46-260 (mac)

Use additional sheets if more space is required.

HERBERT H. BATEMAN
1st DISTRICT, VIRGINIA

COMMITTEES
NATIONAL SECURITY
CHAIRMAN, SUBCOMMITTEE ON MILITARY READINESS
CHAIRMAN, MERCHANT MARINE PANEL
MEMBER, SUBCOMMITTEE ON RESEARCH AND DEVELOPMENT
MEMBER, MORALE, WELFARE AND RECREATION PANEL
TRANSPORTATION AND INFRASTRUCTURE
MEMBER, SUBCOMMITTEE ON SURFACE TRANSPORTATION
MEMBER, SUBCOMMITTEE ON WATER RESOURCES AND ENVIRONMENT

CO-CHAIRMAN, CONGRESSIONAL AVIATION AND SPACE CAUCUS

Congress of the United States
House of Representatives
Washington, DC 20515–1001

2350 RAYBURN HOUSE OFFICE BUILDING
WASHINGTON, DC 20515–4601
(202) 225–4261

DISTRICT OFFICES:
739 THIMBLE SHOALS BLVD.
NEWPORT NEWS, VA 23606–2545
(757) 873–1132

4712 SOUTHPOINT PARKWAY
FREDERICKSBURG, VA 22407
(540) 898–2975

BOX 447
ACCOMAC, VA 23301–0447
(757) 787–7836

IN VA CALL TOLL FREE
1–800–354–5527

May 19, 1998

(3)

MC ✓

Honorable Robin Carle
Clerk, US House of Representatives
Legislative Resource Center
B-106 Cannon HOB
Washington, D. C. 20515

Dear Ms. Carle:

In reviewing my Financial Disclosure Statement for Calendar Year 1997, I find ~~several~~ two omissions which I would like to correct.

Please substitute the attached revised pages for the earlier ones I submitted.

Thanking you, I am

Sincerely,

Herbert H. Bateman
Member of Congress

Attachment

HHB/ph

HAND DELIVERED

98 MAY 21 PM 2:48

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THIS MAILING WAS PREPARED, PUBLISHED AND MAILED AT TAXPAYER EXPENSE

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1997

FORM A
For use by Members, officers, and employees

RECEIVED
98 MAY 21 PM 2:48

HERBERT HARVELL BATEMAN
(Full Name)

2350 Rayburn HOB Washington, DC 20515 202/225-4261
(Mailing Address) (Daytime Telephone)

HAND DELIVERED
(Office Use Only)

Filer Status	[X] Member of the U S House of Representatives	State: VA District 1st	[ ] Officer or Employee	Employing Office
Report Type	[ ] Annual (May 15)	[X] Amendment	[ ] Termination	Termination Date

A *$200 penalty* shall be assessed against anyone who files more than 30 days late.

PRELIMINARY INFORMATION — ANSWER EACH OF THESE QUESTIONS

I. Did you or your spouse have "earned" income (e.g., salaries or fees) of $200 or more from any source in the reporting period? **If yes, complete and attach Schedule I.**	Yes [X]	No [ ]	VI. Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $250 and not otherwise exempt)? **If yes, complete and attach Schedule VI.**	Yes [ ]	No [X]
II. Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? **If yes, complete and attach Schedule II.**	Yes [X]	No [ ]	VII. Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $250 from one source)? **If yes, complete and attach Schedule VII.**	Yes [X]	No [ ]
III. Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? **If yes, complete and attach Schedule III.**	Yes [X]	No [ ]	VIII. Did you hold any reportable positions on or before the date of filing in the current calendar year? **If yes, complete and attach Schedule VIII.**	Yes [ ]	No [X]
IV. Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset worth more than $1,000 in the reporting period? **If yes, complete and attach Schedule IV.**	Yes [X]	No [ ]	IX. Did you have any reportable agreement or arrangement with an outside entity? **If yes, complete and attach Schedule IX.**	Yes [ ]	No [X]
V. Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? **If yes, complete and attach Schedule V.**	Yes [ ]	No [X]	**Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.**		

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION — ANSWER EACH OF THESE QUESTIONS

TRUSTS—Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child?	Yes [ ]	No [X]
EXEMPTION—Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption?	Yes [ ]	No [X]

CERTIFICATION — THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended. The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct or its designee. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil penalties and criminal sanctions (*See* 5 U.S.C. app. 4, §104 and 18 U.S.C. §1001).

SIGNATURE OF REPORTING INDIVIDUAL

DATE (Month/Day/Year) 5-20-98

SCHEDULE III — ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Name Herbert Harvell Bateman | Page 5 of 9

SP, DC, JT	BLOCK A: Asset and/or Income Source	BLOCK B: Year-End Value of Asset — A: None	B: $1 – $1,000	C: $1,001 – $15,000	D: $15,001 – $50,000	E: $50,001 – $100,000	F: $100,001 – $250,000	G: $250,001 – $500,000	H: $500,001 – $1,000,000	I: $1,000,001 – $5,000,000	J: $5,000,001 – $25,000,000	K: $25,000,001 – $50,000,000	L: Over $50,000,000	BLOCK C: Type of Income — DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Type of Income (Specify)	BLOCK D: Amount of Income — I: None	II: $1 – $200	III: $201 – $1,000	IV: $1,001 – $2,500	V: $2,501 – $5,000	VI: $5,001 – $15,000	VII: $15,001 – $50,000	VIII: $50,001 – $100,000	IX: $100,001 – $1,000,000	X: $1,000,001 – $5,000,000	XI: Over $5,000,000	BLOCK E: Transaction — P, S, E
SP	Templeton World Mutual Fund IRA				X									X				X								X							
	Avalon Properties--REIT			X										X									X										
	USF&G			X										X									X										
	CBS (formerly Westinghouse			X										X									X										
	Smithfield Food					X											X							X									S
JT	Jefferson Natl Bank Checking Acct				X											X								X									
	Wachovia Bank Stock (formerly Jefferson Natl)			X										X									X										
	Crestar			X										X									X										
	NationsBank--checking acct			X												X							X										
SP	Prudential insurance			X										X									X										
	Cong Federal Credit Union	X														X							X										
	Zweig Strategy Fund Classic			X										X			X							X									
	Camden Prop Trust--REIT			X										X									X										
	VA Dept Taxation																							X									Tax Refund
	Computer Invest Services Mun Bond Fund				X												X								X								

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UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1997

FORM A
For use by Members, officers, and employees

98 MAY 15 PM 6:13

RECEIVED
98 MAY 15 PM 6:07
HAND DELIVERED

Xavier Becerra
(Full Name)

1910 Sunset Blvd., #560
(Mailing Address)

Los Angeles, CA 90026

Daytime Telephone (213)483-1425

COMMITTEE U.

(Office Use Only) (9)

Filer Status	☒ Member of the U.S. House of Representatives	State CA District 30th	☐ Officer or Employee	Employing Office
Report Type	☒ Annual (May 15)	☐ Amendment	☐ Termination	Termination Date

A *$200 penalty* shall be assessed against anyone who files more than 30 days late.

PRELIMINARY INFORMATION — ANSWER EACH OF THESE QUESTIONS

I. Did you or your spouse have "earned" income (e.g., salaries or fees) of $200 or more from any source in the reporting period? **If yes, complete and attach Schedule I.**	Yes ☒	No ☐
II. Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? **If yes, complete and attach Schedule II.**	Yes ☒	No ☐
III. Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? **If yes, complete and attach Schedule III.**	Yes ☒	No ☐
IV. Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset worth more than $1,000 in the reporting period? **If yes, complete and attach Schedule IV.**	Yes ☒	No ☐
V. Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? **If yes, complete and attach Schedule V.**	Yes ☒	No ☐
VI. Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $250 and not otherwise exempt)? **If yes, complete and attach Schedule VI.**	Yes ☐	No ☒
VII. Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $250 from one source)? **If yes, complete and attach Schedule VII.**	Yes ☒	No ☐
VIII. Did you hold any reportable positions on or before the date of filing in the current calendar year? **If yes, complete and attach Schedule VIII.**	Yes ☒	No ☐
IX. Did you have any reportable agreement or arrangement with an outside entity? **If yes, complete and attach Schedule IX.**	Yes ☐	No ☒

Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION — ANSWER EACH OF THESE QUESTIONS

TRUSTS—Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child?	Yes ☐	No ☒
EXEMPTION—Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption?	Yes ☐	No ☒

CERTIFICATION — THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended. The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct or its designee. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil penalties and criminal sanctions (*See* 5 U.S.C. app. 4, §104 and 18 U.S.C. §1001).

SIGNATURE OF REPORTING INDIVIDUAL

DATE (Month/Day/Year) 5/15/98

SCHEDULE I — EARNED INCOME

List the source, type, and amount of earned income from any source (other than the filer's current employment by the U.S. Government) totalling $200 or more during the preceding calendar year. For a spouse, list the source and amount of any honoraria; list only the source for other spouse earned income exceeding $1,000.

	Source	Type	Amount
Examples	Keene State	Approved Teaching Fee	$6,000
	State of Maryland	Legislative Pension	$9,000
	Civil War Roundtable (Oct 2nd)	Spouse Speech	$1,000
	Ontario County Board of Education	Spouse Salary	NA
	George Washington University Hospital	Spouse Salary	NA
	National Coalition of Hispanic Health and Human Services Organization	Spouse Consulting Fee	NA

For payments to charity in lieu of honoraria, use Schedule II.

Name	Xavier Becerra	Page 3 of 8

SCHEDULE II — PAYMENTS IN LIEU OF HONORARIA MADE TO CHARITY

List the source, activity (i.e., speech, appearance, or article), date, and amount of any payment made by the sponsor of an event to a charitable organization in lieu of an honorarium. A separate confidential list of charities receiving such payments must be filed directly with the Committee on Standards of Official Conduct. An envelope for transmitting the list is included in each Member's filing package.

Source	Activity	Date	Amount
Examples Association of American Associations, Wash., D.C.	Speech	Feb. 2, 1997	$2,000
XYZ Magazine	Article	Aug. 13, 1997	$500
Hispanic Conference of Western New York	Speech	9-10-97	$500

This page may be copied if more space is required.

Name Xavier Becerra | Page 4 of 9

SCHEDULE III — ASSETS AND "UNEARNED" INCOME

BLOCK A — Asset and/or Income Source

Identify (a) each asset held for investment or production of income with a fair market value exceeding $1,000 at the end of the reporting year, and (b) any other asset or source of income which generated more than $200 in "unearned" income during the year. For rental property or land, provide an address. Provide full names of any mutual funds. For an IRA or retirement plan that is *self-directed*, list the underlying assets worth more than $1,000. For an IRA or retirement plan that is not selfdirected, name the institution holding the account.

Exclude: Your personal residence(s) (unless there is rental income), any debt owed to you by your spouse, or by your or your spouse's child, parent, or sibling; any deposits totalling $5,000 or less in personal savings accounts; any financial interests in or income derived from U.S. Government retirement programs.

If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC) or is jointly held (JT), in the optional column on the far left.

BLOCK B — Value of Asset

at close of reporting year

If you use a valuation method other than fair market value, please specify the method used. If an asset was sold and is included only because it generated income, the value should be "None."

BLOCK C — Type of Income

BLOCK D — Amount of Income

For IRA's and retirement plans that are *not* self-directed, you may write in "NA" for income.

BLOCK E — Transaction

Indicate if asset was purchased (P), sold (S), or exchanged (E) in reporting year.

	BLOCK A	B: A None	B: B $1 – $1,000	B: C $1,001 – $15,000	B: D $15,001 – $50,000	B: E $50,001 – $100,000	B: F $100,001 – $250,000	B: G $250,001 – $500,000	B: H $500,001 – $1,000,000	B: I $1,000,001 – $5,000,000	B: J $5,000,001 – $25,000,000	B: K $25,000,001 – $50,000,000	B: L Over $50,000,000	C: DIVIDENDS	C: RENT	C: INTEREST	C: CAPITAL GAINS	C: EXCEPTED TRUST	C: QUALIFIED BLIND TRUST	C: Other Type of Income (Specify. For Example: Partnership Income or Farm Income)	D: I None	D: II $1 – $200	D: III $201 – $1,000	D: IV $1,001 – $2,500	D: V $2,501 – $5,000	D: VI $5,001 – $15,000	D: VII $15,001 – $50,000	D: VIII $50,001 – $100,000	D: IX $100,001 – $1,000,000	D: X $1,000,001 – $5,000,000	D: XI Over $5,000,000	E: P, S, E
SP														X																	
DC	*Examples*		Indefinite			X														Royalties											
JT							X									X									X						P
JT	Home Savings - Checking			X												X						X									
JT	Congressional Federal Credit Union - Checking			X												X						X									
JT	1005 E. Mooney Dr. Monterey Park, CA						X								X										X						
JT	1633 Hill Drive Los Angeles, CA							X							X												X				
JT	152 Duddington, SE Washington, DC	X													X										X						S
	Allstate - IRA			X												X						X									

For additional assets and unearned income, use next page.

SCHEDULE III — ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Name: Xavier Becerra | Page 5 of 9

SP, DC, JT	BLOCK A: Asset and/or Income Source	BLOCK B: Year-End Value of Asset — A: None	B: $1 – $1,000	C: $1,001 – $15,000	D: $15,001 – $50,000	E: $50,001 – $100,000	F: $100,001 – $250,000	G: $250,001 – $500,000	H: $500,001 – $1,000,000	I: $1,000,001 – $5,000,000	J: $5,000,001 – $25,000,000	K: $25,000,001 – $50,000,000	L: Over $50,000,000	BLOCK C: Type of Income — DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Type of Income (Specify)	BLOCK D: Amount of Income — I: None	II: $1 – $200	III: $201 – $1,000	IV: $1,001 – $2,500	V: $2,501 – $5,000	VI: $5,001 – $15,000	VII: $15,001 – $50,000	VIII: $50,001 – $100,000	IX: $100,001 – $1,000,000	X: $1,000,001 – $5,000,000	XI: Over $5,000,000	BLOCK E: Transaction
JT	MFS Total Return Fund				X									X			X								X							S
SP	MFS Total Return Fund			X										X			X							X								P/S
JT	TV AZTECA			X													X					X										P/S
	Merrill Lynch Global Allo FL			X										X																		P/S
SP	Merrill Lynch Global Allo, FL			X										X									X									P
SP	Putnam Asia PAC F			X										X			X						X									P
SP	Kember Dremen SMCP F			X										X			X						X									P
SP	Davis NY Venture F			X										X			X						X									P
SP	ML S+P 500 Index FD			X										X			X						X									P
SP	Colonial TRI FD			X										X			X						X									P
SP	Seligman Comm FD			X										X			X						X									P
SP	ML Euro FD			X										X			X						X									P
SP	ML Dev Cap Mkt FD			X													X						X									P
SP	ML PACIFIC FD																X						X									P

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SCHEDULE IV — TRANSACTIONS

Name Xavier Becerra

SP, DC, JT	Asset	Type of Transaction: PURCHASE	Type of Transaction: SALE	Type of Transaction: EXCHANGE	Date (MO/DAY/YR)	Amount of Transaction: B $1,001 – $15,000	C $15,001 – $50,000	D $50,001 – $100,000	E $100,001 – $250,000	F $250,001 – $500,000	G $500,001 – $1,000,000	H $1,000,001 – $5,000,000	I $5,000,001 – $25,000,000	J $25,000,001 – $50,000,000	K Over $50,000,000
SP	Example: Mega Corporation Common Stock	X			10-12-97		X								
SP	ML PACIFIC FD	X			12-5-97	X									
SP	ML DEV CAP MKTS FD	X			12-5-97	X									
SP	ML EUROFUND	X			12-5-97	X									
SP	SELIGMAN COMM. FD	X			12-5-97	X									
SP	COLONIAL TR	X			12-5-97	X									
SP	MFS TOTAL RETURN FD		X		12-5-97		X								
SP	ML S+P 500 INDEX FD	X			12-5-97	X									
SP	DAVIS NY VENTURE FD	X			12-5-97	X									
SP	KEMPER DREMAN SM CAP FD	X			12-5-97	X									
SP	PUTNAM ASIA PAC FD	X			12-5-97	X									
SP	ML GLOBAL ALLOC FD	X			5-6-97	X									
	ML GLOBAL ALLOC FD	X			5-6-97	X									
JT	TV AZTECA COM STK/ADR	X			8-15-97	X									
JT	TV AZTECA COM STK/ADR		X		9-3-97	X									

Report any purchase, sale, or exchange by you, your spouse, or dependent child during the reporting year of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child, or the purchase or sale of your personal residence, unless it is rented out.

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SCHEDULE V — LIABILITIES

Report liabilities of over $10,000 owed to any one creditor ***at any time*** during the reporting period by you, your spouse, or dependent child. Mark the highest amount owed during the year. **Exclude:** Any mortgage on your personal residence (unless it is rented out), loans secured by automobiles, household furniture, or appliances, and liabilities owed to a spouse, or the child, parent, or sibling of you or your spouse. Report ***revolving charge accounts*** only if the balance at the end of the reporting period exceeded $10,000.

SP, DC, JT	Creditor	Type of Liability	Amount of Liability									
			B $10,001 – $15,000	C $15,001 – $50,000	D $50,001 – $100,000	E $100,001 – $250,000	F $250,001 – $500,000	G $500,001 – $1,000,000	H $1,000,001 – $5,000,000	I $5,000,001 – $25,000,000	J $25,000,001 – $50,000,000	K Over $50,000,000
	Example First Bank of Wilmington, Delaware	Mortgage on 123 Main St., Dover, Del				X						
	Wells Fargo Bank, California	Mortgage 1005 E. Mooney Dr. Monterey Park, CA			X							
	Bank of America, California	Mortgage 1633 Hill Dr. Los Angeles, CA					X					
	Chevy Chase FSB Bank, Washington, D.C.	Mortgage 152 Duddington, SE Washington, DC				X						

SCHEDULE VI — GIFTS

Report the source, a brief description, and the value of all gifts totalling more than $250 received by you, your spouse, or a dependent child from any source during the year.

Exclude: Gifts from relatives, gifts of personal hospitality of an individual, local meals, and gifts to a spouse or dependent child that are totally independent of his or her relationship to you. Gifts with a value of $100 or less need not be added towards the $250 disclosure threshold.

Note: The gift rule (House Rule 51) prohibits gifts except as specifically provided in the rule.

Source	Description	Value
Example: Mr. Joseph H. Smith, Anytown, Anystate	Silver Platter (determination on personal friendship received from Committee on Standards)	$270

Use additional sheets if more space is required.

SCHEDULE VII —TRAVEL PAYMENTS AND REIMBURSEMENTS

Identify the source and list travel itinerary, dates, and nature of expenses provided for travel and travel-related expenses totalling more than $250 received by you, your spouse, or a dependent child during the reporting period. Indicate whether a family member accompanied the traveler at the sponsor's expense, and the amount of time, if any, that was not at the sponsor's expense. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor.

Exclude: Travel-related expenses provided by federal, state, and local governments, or by a foreign government required to be separately reported under the Foreign Gifts and Decorations Act (5 U.S.C. § 7342); travel paid for by a Federal political committee; travel provided to a spouse or dependent child that is totally independent of his or her relationship to you.

Source	Date(s)	Point of Departure—Destination—Point of Return	Lodging? (Y/N)	Food? (Y/N)	Was a Family Member Included? (Y/N)	Any time not at sponsor's expense
Examples: Chicago Chamber of Commerce	Mar. 2	Wash., D.C.—Chicago—Wash., D.C.	N	N	N	N
Roycroft Corporation	Aug. 6–13	Wash., D.C.—Los Angeles—Cleveland	Y	Y	Y	4 Days
Mexican American Bar Assoc.	Oct. 10-11	Wash., DC - El Paso, TX - Wash., DC	Y	Y	N	N
Hispanic Conference of Western New York	Aug. 22-24	Wash., DC - Buffalo, NY - Wash., DC	Y	Y	Y	N
Congressional Hispanic Caucus Institute	July 6-7	Wash., DC - San Antonio, TX - Wash., DC	Y	Y	N	N
RJ Reynolds Courtesy Call	June 30	Wash., DC - Salem, NC - Wash., DC	N	Y	N	N

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SCHEDULE VIII — POSITIONS

Report all positions, compensated or uncompensated, held during the current calendar year as an officer, director, trustee of an organization, partner, proprietor, representative, employee, or consultant of any corporation, firm, partnership, or other business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States.

Exclude: Positions held in any religious, social, fraternal, or political entities; positions solely of an honorary nature; and positions listed on Schedule I

Position	Name of Organization
Board Member	Los Angeles Annenberg Metropolitan Project (LAAMP)
Trustee	Pitzer College
Board Member	National Association of Latino Elected & Appointed Officials (NALEO)
Board Member	Congressional Hispanic Caucus Institute
Board Member	Close Up Foundation

SCHEDULE IX — AGREEMENTS

Identify the date, parties to, and general terms of any agreement or arrangement with respect to: future employment; a leave of absence during the period of government service; continuation or deferral of payments by a former or current employer other than the U.S. Government; or continuing participation in an employee welfare or benefit plan maintained by a former employer.

Date	Parties To	Terms of Agreement

GPO: 1998 46-260 (mac)

Use additional sheets if more space is required.

CAPITOL OFFICE
1119 LONGWORTH HOB
WASHINGTON, DC 20515
PHONE (202) 225-6235
FAX (202) 225-2202

DISTRICT OFFICE
1510 SUNSET BLVD. #560
LOS ANGELES, CA 90026
PHONE (213) 483-1425
FAX (213) 483-1429

98 JUN 11 Fil 3:46

HAND DELIVERED

COMMITTEE ON WAYS AND MEANS
SUBCOMMITTEE ON HEALTH

CHAIRMAN,
CONGRESSIONAL HISPANIC CAUCUS

Congress of the United States

House of Representatives

XAVIER BECERRA
30TH DISTRICT, CALIFORNIA

June 10, 1998

(2)

James V. Hansen, Chairman
Committee on Standards of Official Conduct
U.S. House of Representatives
Suite HT-2, The Capitol
Washington, DC 20515

140

Dear Chairman Hansen:

This letter is to advise the Committee of an amendment to my Financial Disclosure Statement for calendar year 1997. While Schedule III detailed the sale of my house on Duddington Place in Washington D.C., this information was inadvertently omitted from Schedule IV. Schedule IV should be amended to reflect the sale of a property located at 152 Duddington Place, SE, in Washington, DC, on 12-22-97; the amount of the transaction was between $100,001 - $250,000 (see attached addition to Schedule IV).

If you have any questions regarding this transaction, please contact me or Krista Atteberry of my staff.

Sincerely,

XAVIER BECERRA
Member of Congress

XB:mn

SCHEDULE IV — TRANSACTIONS

Name: Xavier Becerra | Page ,of

Report any purchase, sale, or exchange by you, your spouse, or dependent child during the reporting year of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child, or the purchase or sale of your personal residence, unless it is rented out		Type of Transaction			Date	Amount of Transaction									
SP, DC, JT	Asset	PURCHASE	SALE	EXCHANGE	(MO/DAY/YR)	B $1,001–$15,000	C $15,001–$50,000	D $50,001–$100,000	E $100,001–$250,000	F $250,001–$500,000	G $500,001–$1,000,000	H $1,000,001–$5,000,000	I $5,000,001–$25,000,000	J $25,000,001–$50,000,000	K Over $50,000,000
SP	*Example* Mega Corporation Common Stock	X			10-12-97		X								
	152 Duddington, S.E., Washington, DC		X		12-22-97				X						

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CAPITOL OFFICE
1119 LONGWORTH HOB
WASHINGTON, DC 20515
PHONE (202) 225-6235
FAX (202) 225-2202

DISTRICT OFFICE
1313 SUNSET BLVD #56
LOS ANGELES, CA 90026
PHONE (213) 483-1425
FAX (213) 483-1423

98 JUN 11 PM 3:46

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COMMITTEE ON WAYS AND MEANS
SUBCOMMITTEE ON HEALTH

CHAIRMAN
CONGRESSIONAL HISPANIC CAUCUS

Congress of the United States
House of Representatives
XAVIER BECERRA
30TH DISTRICT, CALIFORNIA

(1)

June 10, 1998

V
HC

James V. Hansen, Chairman
Committee on Standards of Official Conduct
U.S. House of Representatives
Suite HT-2, The Capitol
Washington, DC 20515

Dear Chairman Hansen:

This letter is to advise the Committee of a payment in lieu of honoraria made to a charity on my behalf. The Hispanic Conference of Western New York made a $500 contribution to Pitzer College on my behalf in lieu of honoraria for a speech that I made on 9-10-97.

If you have any questions regarding this transaction, please contact me or Krista Atteberry of my staff.

Sincerely,

XAVIER BECERRA
Member of Congress

RECEIVED

98 MAY 13 PM 12:27

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1997

Form A
For use by Members, officers, and employees

Kenneth E. Bentsen, Jr.
(Full Name)

128 Cannon House Office Building
(Mailing Address)

Washington, D C DC 20515

Daytime Telephone 202-225-7508

HAND DELIVERED
(Office Use Only)

8

Filer Status	[X]	Member of the U S House of Representatives	State TX District 25	[ ]	Officer or Employee	Employing Office
Report Type	[X]	Annual (May 15)		[ ]	Amendment	Termination Date [ ] Termination

A $200 penalty shall be assessed against anyone who files more than 30 days late.

PRELIMINARY INFORMATION -- ANSWER EACH OF THESE QUESTIONS

I Did you or your spouse have "earned" income (e g , salaries or fees) of $200 or more from any source in the reporting period?
If yes, complete and attach Schedule I. Yes [X] No [ ]

II Did any individual or organization make a donation to charity in lieu of paying you for a speech, apppearance, or article in the reporting period?
If yes, complete and attach Schedule II. Yes [ ] No [X]

III Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period?
If yes, complete and attach Schedule III. Yes [X] No [ ]

IV Did you, your spouse or dependent child purchase, sell, or exchange any reportable asset worth more than $1,000 in the reporting period?
If yes, complete and attach Schedule IV. Yes [X] No [ ]

V Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period?*
If yes, complete and attach Schedule V. Yes [X] No [ ]

VI Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i e , aggregating more than $250 and not otherwise exempt)?
If yes, complete and attach Schedule VI. Yes [ ] No [X]

VII Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $250 from one source)?
If yes, complete and attach Schedule VII. Yes [X] No [ ]

VIII Did you hold any reportable positions on or before the date of filing in the current calendar year?
If yes, complete and attach Schedule VIII. Yes [ ] No [X]

IX Did you have any reportable agreement or arrangement with an outside entity?
If yes, complete and attach Schedule IX. Yes [X] No [ ]

Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.

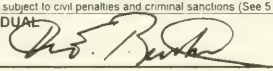
EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION -- ANSWER EACH OF THESE QUESTIONS

TRUSTS - Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child? (See Instructions, pages 10-11) Yes [ ] No [X]

EXEMPTION Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption? (See Instructions, page 11) Yes [ ] No [X]

CERTIFICATION -- THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended. The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct or its designee. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil penalties and criminal sanctions (See 5 U S C. app. 4, 104 and 18 U S C 1001)

SIGNATURE OF REPORTING INDIVIDUAL 

DATE (Month/Day/Year) 5-12-98

254

SCHEDULE I -- EARNED INCOME

List the source, type, and amount of earned income from any source (other than the filer's current employment by the U.S. Government) totalling $200 or more during the preceding calendar year. For a spouse, list the source and amount of any honoraria; list only the source for other spouse earned income exceeding $1,000. For further information, see Instructions, pages 12-13.

	Source	Type	Amount
Examples	Keene State	Approved Teaching Fee	$10,000
	State of Maryland	Legislative Pension	$9,000
	Civil War Roundtable (Oct. 2nd)	Spouse Speech	$1,000
	Ontario County Board of Education	Spouse Salary	NA
	Hayes, Domenici & Associate	Spouse Salary	$11,125.00
	George K. Baum & Company	Deferred Compensation per 1994 Agreement	$2,841.00

For payments to charity in lieu of honoraria, use Schedule II.

SCHEDULE III -- ASSETS AND "UNEARNED" INCOME

BLOCK A **Asset and/or Income Source** Identify (a) each asset held for investment or production of income with a fair market value exceeding $1,000 at the end of the reporting year, and (b) any other asset or source of income which generated more than $200 in "unearned" income during the year. For rental property or land, provide an address. Provide full names of any mutual funds. For an IRA or retirement plan that is *self-directed*, list the underlying assets worth more than $1,000. For an IRA or retirement plan that is *not* self-directed, name the institution holding the account. **Exclude:** Your personal residence(s) (unless there is rental income), any debt owed to you by your spouse, or by your or your spouse's child, parent, or sibling, any deposits totalling $5,000 or less in personal savings accounts; any financial interests in or income derived from U.S. Government retirement programs. If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC) or is jointly held (JT), in the optional column on the far left. For further information, see Instructions, pages 14-20	BLOCK B **Value of Asset** at close of reporting year If you use a valuation method other than fair market value, please specify the method used. If an asset was sold and is included only because it generated income, the value should be "None."	BLOCK C **Type of Income** If other than one of the listed categories, specify the type of income by writing a brief description in this block.	BLOCK D **Amount of Income** For IRA's and retirement plans that are *not* self-directed, you may write in "NA" for income	BLOCK E **Transaction** Indicate if asset was purchased(P), sold(S), or exchanged(E) in reporting year
SP, DC, JT — *Examples*: SP — Mega Corp. Stock; 123 Main St., Dover, Del.; 1st Bank of Paducah, KY accounts	$15,001 - $50,000 $250,001 - $500,000 $50,001 - $100,000	Dividends Rent Interest	$201 - $1,000 $1,001 - $2,500 $5,001 - $15,000	P
Southwest Airlines	$1,001 - $15,000	Dividends	$1 - $200	S
Fidelity Cash Reserves	$1 - $1,000	Interest	$1 - $200	NA
Fidelity Puritan IRA	$15,001 - $50,000	Capital Gains and Dividends	$1,001 - $2,500	E
Fidelity Magellan IRA	$15,001 - $50,000	Capital Gains and Dividends	$1,001 - $2,500	E
Fidelity Capital & Income IRA	$1,001 - $15,000	Capital Gains and Dividends	$201 - $1,000	NA
Fidelity Contrafund IRA	$15,001 - $50,000	Capital Gains and Dividends	$1,001 - $2,500	E
Fidelity Growth & Income IRA	$15,001 - $50,000	Capital Gains and Dividends	$201 - $1,000	E
GKB Profit Share Account	$1,001 - $15,000	Capital Gains and Dividends	$1 - $200	S

SCHEDULE III -- ASSETS AND "UNEARNED" INCOME

	Estate of Edna R Bentsen	$1,001 - $15,000	Interest	$2,501 - $5,000	NA
	1991 Trust Estate LMB, Sr	$100,001 - $250,000	Dividends	$5,001 - $15,000	NA
	1987 Trust LMB Sr	$15,001 - $50,000	Dividends	$2,501 - $5,000	NA
	Estate of Edna R Bentsen LMB Partnership	$100,001 - $250,000	Dividends	$5,001 - $15,000	NA
	Sp Fidelity Magellan IRA	$1,001 - $15,000	Capital Gains and Dividends	$201 - $1,000	NA
	Sp Fidelity Puritan IRA	$1,001 - $15,000	Capital Gains and Dividends	$201 - $1,000	NA
	Jt Porperty at 2125 Goldsmith Houston, Tx	$250,001 - $500,000	Rent	$5,001 - $15,000	S
	George K Baum Gold Account Dreyfus Money Market	$50,001 - $100,000	Capital Gains and Dividends	$2,501 - $5,000	P

SCHEDULE IV -- TRANSACTIONS

Report any purchase, sale, or exchange by you, your spouse, or dependent child during the reporting year of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child, or the purchase or sale of your personal residence, unless it is rented out. For further information, see Instructions, pages 20-21.

SP,DC,JT	Asset	Type of Transaction	Date	Amount of Transaction
Example	Mega Corporation Common Stock	Purchase	10/12/94	$15,001 - $50,000
	Southwest Airlines	Sold	9/22/97	$1,001 - $15,000
	GKB Profit Share Account	Sold	1/7/97	$1,001 - $15,000
	Fidelity Puritan	Sold	2/13/97	$1,001 - $15,000
	Fidelity Magellan	Sold	2/13/97	$1,001 - $15,000
	Fidelity Puritan	Sold	5/23/97	$1,001 - $15,000
	Fidelity Magellan	Sold	5/23/97	$1,001 - $15,000
	Fidelity Puritan	Sold	7/18/97	$1,001 - $15,000
	Fidelity Contrafund	Sold	7/18/97	$1,001 - $15,000
	Fidelity Growth & Income	Sold	7/18/97	$1,001 - $15,000
	Property at 2125 Goldsmith Houston, Texas	Sold	8/28/97	$250,001 - $500,000

SCHEDULE V -- LIABILITIES

Report liabilities of over $10,000 owed to any one creditor ***at any time*** during the reporting period by you, your spouse, or dependent child. Mark the highest amount owed during the year.
Exclude: Any mortgage on your personal residence (unless it is rented out), loans secured by automobiles, household furniture, or appliances, and liabilities owed to a spouse, or the child, parent, or sibling of you or your spouse. Report ***revolving charge accounts*** only if the balance at the end of the reporting period exceeded $10,000. For further information, see Instructions, pages 21-22.

SP,DC,JT	Creditor	Type of Liability	Amount of Liability
Example	First Bank of Wilmington, Delaware	Mortgage on 123 Main St., Dover, Del	$100,001 - $250,000
JT	Chase Mortgage Company	First Home Mortgage Loan	$100,001 - $250,000

SCHEDULE VII -- TRAVEL PAYMENTS AND REIMBURSEMENTS

Identify the source and list travel itinerary, dates, and nature of expenses provided for travel and travel-related expenses totalling more than $250 received by you, your spouse, or a dependent child during the reporting period. Indicate whether a family member accompanied the traveler at the sponsor's expense, and the amount of time, if any, that was not at the sponsor's expense. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor.
Exclude: Travel-related expenses provided by federal, state and local governments, or by a foreign government required to be separately reported under the Foreign Gifts and Decorations Act (5 U.S.C. 7342); travel paid for by a Federal political committee; travel provided to a spouse or dependent child that is totally independent of his or her relationship to you. For further information, see Instructions, pages 24-26

Source	Date(s)	Point of Departure--Destination--Point of Return	Lodging? (Y/N)	Food? (Y/N)	Was a Family Member Included? (Y/N)	Any time not at sponsor's expense
Examples Chicago Chamber of Commerce	Mar 2	Wash , D C -Chicago-Wash , D C	N	N	N	N
Mega Corporation	Aug 6-13	Wash , D C -Los Angeles-Cleveland	Y	Y	Y	4 Days
Aspen Institute	3/7-9/97	D C -Hershey, Pa-D C	Y	Y	Y	No
American Israel Education Foundation	8/2-8/97	D C -Israel-D C	Y	Y	Y	No

SCHEDULE IX -- AGREEMENTS

Identify the date, parties to, and general terms of any agreement or arrangement with respect to future employment, a leave of absence during the period of government service, continuation or deferral of payments by a former or current employer other than the U.S. Government, or continuing participation in an employee welfare or benefit plan maintained by a former employer. For further information, see Instructions, pages 26-27

Date	Parties To	Terms of Agreement
12/24/94	Kenneth E. Bentsen, Jr. and George K. Baum & Company	Deferred Compensation for work in 1994

KENNETH E. BENTSEN, Jr.
25TH DISTRICT, TEXAS

329 CANNON HOUSE OFFICE BUILDING
WASHINGTON, DC 20515-4325
(202) 225-7508
(202) 225-2947 FAX
email: bentsen@mail.house.gov
http://www.house.gov/bentsen/welcome.shtml

COMMITTEES
BANKING AND FINANCIAL SERVICES
SUBCOMMITTEE ON
FINANCIAL INSTITUTIONS AND
CONSUMER CREDIT
SUBCOMMITTEE ON
DOMESTIC AND INTERNATIONAL
MONETARY POLICY
BUDGET

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98 JUN -4 PM 2 10

Congress of the United States
House of Representatives
Washington, DC 20515-4325

INSIDE MAIL

DISTRICT OFFICES
6575 WEST LOOP SOUTH
SUITE 496
BELLAIRE, TX 77401
(713) 667-3554
(713) 667-4833 FAX

1001 E. SOUTHMORE
SUITE 810
PASADENA, TX 77502
(713) 473-4334
(713) 475-8887 FAX

1300 ROLLINGBROOK DRIVE
SUITE 517
BAYTOWN, TX 77521
(281) 837-8225

June 2, 1998

Ms. Robin H. Carle
Clerk of the House
The Capitol, Room HT13
Washington, D.C. 20515

Dear Ms. Carle

In reviewing my financial disclosure statement for Calendar Year 1997, I discovered an inadvertent error in filling out Schedule IV -- Transactions. Please find enclosed an amended disclosure statement

Thank you for your attention to this matter.

With kindest personal regards,

Sincerely,

Kenneth E. Bentsen, Jr
Member of Congress

KEB:vw

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1997

Form A
For use by Members, officers, and employees

RECEIVED
LATHAM & WATKINS
98 JUN -4 PM 2:10
OFFICE OF THE CLERK
U.S. HOUSE OF REPRESENTATIVES
INSIDE MAIL
(Office Use Only)

Kenneth E. Bentsen, Jr.
(Full Name)

128 Cannon House Office Building
(Mailing Address)

Washington, D.C. DC 20515

Daytime Telephone
202-225-7508

Filer Status	[X]	Member of the U.S. House of Representatives	State TX District 25	[ ]	Officer or Employee	Employing Office
Report Type	[ ]	Annual (May 15)	[X] Amendment	[ ]	Termination	Termination Date

A $200 penalty shall be assessed against anyone who files more than 30 days late.

PRELIMINARY INFORMATION -- ANSWER EACH OF THESE QUESTIONS

I. Did you or your spouse have "earned" income (e.g., salaries or fees) of $200 or more from any source in the reporting period?
If yes, complete and attach Schedule I. Yes [X] No [ ]

II. Did any individual or organization make a donation to charity in lieu of paying you for a speech, apppearance, or article in the reporting period?
If yes, complete and attach Schedule II. Yes [ ] No [X]

III. Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period?
If yes, complete and attach Schedule III. Yes [X] No [ ]

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If yes, complete and attach Schedule IV. Yes [X] No [ ]

V. Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period?
If yes, complete and attach Schedule V. Yes [X] No [ ]

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Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.

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SIGNATURE OF REPORTING INDIVIDUAL

DATE (Month/Day/Year) 6-1-98

98 JUN -2 PM 4:55

263

SCHEDULE I -- EARNED INCOME

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	Source	Type	Amount
Examples:	Keene State	Approved Teaching Fee	$10,000
	State of Maryland	Legislative Pension	$9,000
	Civil War Roundtable (Oct. 2nd)	Spouse Speech	$1,000
	Ontario County Board of Education	Spouse Salary	NA
	Hayes, Domenici & Associate	Spouse Salary	$11,125.00
	George K. Baum & Company	Deferred Compensation per 1994 Agreement	$2,841.00

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SP DC *Examples* JT — SP — Mega Corp. Stock 123 Main St., Dover, Del 1st Bank of Paducah, KY accounts	$15,001 - $50,000 $250,001 - $500,000 $50,001 - $100,000	Dividends Rent Interest	$201 - $1,000 $1,001 - $2,500 $5,001 - $15,000	P
Southwest Airlines	$1,001 - $15,000	Dividends	$1 - $200	S
Fidelity Cash Reserves	$1 - $1,000	Interest	$1 - $200	NA
Fidelity Puritan IRA	$15,001 - $50,000	Capital Gains and Dividends	$1,001 - $2,500	E
Fidelity Magellan IRA	$15,001 - $50,000	Capital Gains and Dividends	$1,001 - $2,500	E
Fidelity Capital & Income IRA	$1,001 - $15,000	Capital Gains and Dividends	$201 - $1,000	NA
Fidelity Contrafund IRA	$15,001 - $50,000	Capital Gains and Dividends	$1,001 - $2,500	E
Fidelity Growth & Income IRA	$15,001 - $50,000	Capital Gains and Dividends	$201 - $1,000	E
GKB Profit Share Account	$1,001 - $15,000	Capital Gains and Dividends	$1 - $200	S

SCHEDULE III -- ASSETS AND "UNEARNED" INCOME

	Estate of Edna R. Bentsen	$1,001 - $15,000	Interest	$2,501 - $5,000	NA
	1991 Trust Estate LMB, Sr	$100,001 - $250,000	Dividends	$5,001 - $15,000	NA
	1987 Trust LMB Sr	$15,001 - $50,000	Dividends	$2,501 - $5,000	NA
	Estate of Edna R. Bentsen LMB Partnership	$100,001 - $250,000	Dividends	$5,001 - $15,000	NA
	Sp Fidelity Magellan IRA	$1,001 - $15,000	Capital Gains and Dividends	$201 - $1,000	NA
	Sp Fidelity Puritan IRA	$1,001 - $15,000	Capital Gains and Dividends	$201 - $1,000	NA
	Jt Porperty at 2125 Goldsmith Houston, Tx	$250,001 - $500,000	Rent	$5,001 - $15,000	S
	George K Baum Gold Account Dreyfus Money Market	$50,001 - $100,000	Capital Gains and Dividends	$2,501 - $5,000	P

SCHEDULE IV -- TRANSACTIONS

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SP,DC,JT	Asset	Type of Transaction	Date	Amount of Transaction
	Example Mega Corporation Common Stock	Purchase	10/12/94	$15,001 - $50,000
	Southwest Airlines	Sold	9/22/97	$1,001 - $15,000
	GKB Profit Share Account	Sold	1/7/97	$1,001 - $15,000
	Fidelity Puritan	Sold	2/13/97	$1,001 - $15,000
	Fidelity Magellan	Sold	2/13/97	$1,001 - $15,000
	Fidelity Puritan	Sold	5/23/97	$1,001 - $15,000
	Fidelity Magellan	Sold	5/23/97	$1,001 - $15,000
	Fidelity Puritan	Sold	7/18/97	$1,001 - $15,000
	Fidelity Contrafund	Sold	7/18/97	$1,001 - $15,000
	Fidelity Growth & Income	Sold	7/18/97	$1,001 - $15,000
	Property at 2125 Goldsmith Houston, Texas	Sold	8/28/97	$250,001 - $500,000
	George K. Baum & Company Gold Account Dreyfus Money Market	Purchase	8/28/97	$50,001 - $100,000

SCHEDULE V -- LIABILITIES

Report liabilities of over $10,000 owed to any one creditor ***at any time*** during the reporting period by you, your spouse, or dependent child. Mark the highest amount owed during the year.
Exclude: Any mortgage on your personal residence (unless it is rented out), loans secured by automobiles, household furniture, or appliances, and liabilities owed to a spouse, or the child, parent, or sibling of you or your spouse. Report ***revolving charge accounts*** only if the balance at the end of the reporting period exceeded $10,000. For further information, see Instructions, pages 21-22.

SP,DC,JT	Creditor	Type of Liability	Amount of Liability
	Example: First Bank of Wilmington, Delaware	Mortgage on 123 Main St., Dover, Del	$100,001 - $250,000
JT	Chase Mortgage Company	First Home Mortgage Loan	$100,001 - $250,000

SCHEDULE VII -- TRAVEL PAYMENTS AND REIMBURSEMENTS

Identify the source and list travel itinerary, dates, and nature of expenses provided for travel and travel-related expenses totalling more than $250 received by you, your spouse, or a dependent child during the reporting period. Indicate whether a family member accompanied the traveler at the sponsor's expense, and the amount of time, if any, that was not at the sponsor's expense. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor.
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Source	Date(s)	Point of Departure--Destination--Point of Return	Lodging? (Y/N)	Food? (Y/N)	Was a Family Member Included? (Y/N)	Any time not at sponsor's expense
Examples: Chicago Chamber of Commerce	Mar 2	Wash , D C -Chicago-Wash , D C	N	N	N	N
Mega Corporation	Aug 6-13	Wash , D C -Los Angeles-Cleveland	Y	Y	Y	4 Days
Aspen Institute	3/7-9/97	D C.-Hershey, Pa-D C	Y	Y	Y	No
American Israel Education Foundation	8/2-8/97	D.C.-Israel-D.C.	Y	Y	Y	No

SCHEDULE IX -- AGREEMENTS

Identify the date, parties to, and general terms of any agreement or arrangement with respect to future employment, a leave of absence during the period of government service, continuation or deferral of payments by a former or current employer other than the U.S. Government, or continuing participation in an employee welfare or benefit plan maintained by a former employer. For further information, see Instructions, pages 26-27.

Date	Parties To	Terms of Agreement
12/24/94	Kenneth E. Bentsen, Jr. and George K. Baum & Company	Deferred Compensation for work in 1994

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1997

Form A
For use by Members, officers, and employees

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HAND DELIVERED
(Office Use Only)

(11)

DOUGLAS KENT BEREUTER
(Full Name)

2184 Rayburn Building
(Mailing Address)

Washington DC 20515

Daytime Telephone
(202) 225-4806

Filer Status
[X] Member of the U S House of Representatives
State NE District 01
[ ] Officer or Employee
Employing Office

Report Type
[X] Annual (May 15)
[ ] Amendment
[ ] Termination
Termination Date

A $200 penalty shall be assessed against anyone who files more than 30 days late.

PRELIMINARY INFORMATION -- ANSWER EACH OF THESE QUESTIONS

I Did you or your spouse have "earned" income (e g , salaries or fees) of $200 or more from any source in the reporting period?
If yes, complete and attach Schedule I. Yes [X] No [ ]

II Did any individual or organization make a donation to charity in lieu of paying you for a speech, apppearance, or article in the reporting period?
If yes, complete and attach Schedule II. Yes [ ] No [X]

III Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period?
If yes, complete and attach Schedule III. Yes [X] No [ ]

IV Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset worth more than $1,000 in the reporting period?
If yes, complete and attach Schedule IV. Yes [ ] No [X]

V Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period?
If yes, complete and attach Schedule V. Yes [ ] No [X]

VI Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i e , aggregating more than $250 and not otherwise exempt)?
If yes, complete and attach Schedule VI. Yes [ ] No [X]

VII Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $250 from one source)?
If yes, complete and attach Schedule VII. Yes [X] No [ ]

VIII Did you hold any reportable positions on or before the date of filing in the current calendar year?
If yes, complete and attach Schedule VIII. Yes [X] No [ ]

IX Did you have any reportable agreement or arrangement with an outside entity?
If yes, complete and attach Schedule IX. Yes [ ] No [X]

Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION -- ANSWER EACH OF THESE QUESTIONS

TRUSTS Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child? Yes [ ] No [X]

EXEMPTION Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption? Yes [ ] No [X]

CERTIFICATION -- THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct or its designee Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil penalties and criminal sanctions (See 5 U S C app 4, 104 and 18 U S C 1001)

SIGNATURE OF REPORTING INDIVIDUAL Douglas K Bereuter

DATE (Month/Day/Year) May 1, 1998

SCHEDULE I -- EARNED INCOME

List the source, type, and amount of earned income from any source (other than the filer's current employment by the U.S. Government) totalling $200 or more during the preceding calendar year. For a spouse, list the source and amount of any honoraria; list only the source for other spouse earned income exceeding $1,000.

	Source	Type	Amount
Examples	Keene State	Approved Teaching Fee	$10,000
	State of Maryland	Legislative Pension	$9,000
	Civil War Roundtable (Oct. 2nd)	Spouse Speech	$1,000
	Ontario County Board of Education	Spouse Salary	NA
	Arlington County, Virginia School Board	Spouse salary	Income

For payments to charity in lieu of honoraria, use Schedule II.

SCHEDULE II -- PAYMENTS IN LIEU OF HONORARIA MADE TO CHARITY

List the source, activity (i e , speech, appearance, or article), date, and amount of any payment made by the sponsor of an event to a charitable organization in lieu of an honorarium A separate confidential list of charities receiving such payments must be filed directly with the Committe on Standards of Official Conduct An envelope for transmitting the list is included in each Member's filing package

	Source	Activity	Date	Amount
Examples	Association of American Associations, Wash , D.C.	Speech	Feb 2, 1997	$2,000
	XYZ Magazine	Article	Aug 13, 1997	$500

NONE

SCHEDULE III -- ASSETS AND "UNEARNED" INCOME

BLOCK A **Asset and/or Income Source** Identify (a) each asset held for investment or production of income with a fair market value exceeding $1,000 at the end of the reporting year, and (b) any other asset or source of income which generated more than $200 in "unearned" income during the year. For rental property or land, provide an address. Provide full names of any mutual funds. For an IRA or retirement plan that is *self-directed*, list the underlying assets worth more than $1,000. For an IRA or retirement plan that is *not* self-directed, name the institution holding the account. **Exclude:** Your personal residence(s) (unless there is rental income); any debt owed to you by your spouse, or by your or your spouse's child, parent, or sibling; any deposits totalling $5,000 or less in personal savings accounts; any financial interests in or income derived from U.S. Government retirement programs. If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC) or is jointly held (JT), in the optional column on the far left.		BLOCK B **Value of Asset** at close of reporting year If you use a valuation method other than fair market value, please specify the method used. If an asset was sold and is included only because it generated income, the value should be "None."	BLOCK C **Type of Income** If other than one of the listed categories, specify the type of income by writing a brief description in this block	BLOCK D **Amount of Income** For IRA's and retirement plans that are *not* self-directed, you may write in "NA" for income	BLOCK E **Transaction** Indicate if asset was purchased(P), sold(S), or exchanged(E) in reporting year
SP, DC, JT	*Examples:* SP — Mega Corp. Stock	$15,001 - $50,000	Dividends	$201 - $1,000	P
	SP — 123 Main St., Dover, Del.	$250,001 - $500,000	Rent	$1,001 - $2,500	
	1st Bank of Paducah, KY accounts	$50,001 - $100,000	Interest	$5,001 - $15,000	
JT	Savings Account, Calvert Group, Kansas City, MO	$1,001 - $15,000	Interest	$201 - $1,000	NA
DC	Savings Account, Calvert Group, Kansas City, MO (Kirk Bereuter)	$1,001 - $15,000	Interest	$1 - $200	NA
	IRA Account, U.S.A.A. San Antonio, Texas	$15,001 - $50,000	Not available	NA	NA
SP	IRA Account, U.S.A.A., San Antonio, Texas	$15,001 - $50,000	Not available	NA	NA
SP	Retirement Account, Teachers Retirement Fund, Arlington, VA	$15,001 - $50,000	Not available	NA	NA
JT	Checking Account, First Virginia Bank, Falls Church, VA	$1,001 - $15,000	Interest	$1 - $200	NA

SCHEDULE III -- ASSETS AND "UNEARNED" INCOME

JT	Checking Account, Cornhusker Bank, Lincoln, Nebraska	$1,001 - $15,000	Interest	$1 - $200	NA
	One-quarter shareholder in family corp. owning 38 acres of land & residence in unincorporated portion of Summit County, CO & a parcel with storage building in Utica, NE: & shared interest with extended family of farmland & pastureland in Reno County, KS.	$100,001 - $250,000	Not available	None	NA
	My individual interest in Reno County real estate is 1/24 and 1/36 of separate parcels. No earned income.	$100,001 - $250,000	Rent	None	NA
DC	NOW Account, First Virginia Bank, Falls Church, Virginia (Kirk Bereuter)	$1 - $1,000	Interest	$1 - $200	NA
JT	Mutual Funds, U.S.A.A., San Antonio, Texas	$1,001 - $15,000	Capital Gains and Dividends	$201 - $1,000	NA
SP	403B(7) Account, U.S.A.A., San Antonio, Texas	$50,001 - $100,000	Not available	NA	NA
DC	Merchantile Bank, Checking Account, Kansas City, MO (Kirk Bereuter)	$1 - $1,000	Not available	None	NA
JT	U.S.A.A. Federal Savings Bank, San Antonio, Texas	$1 - $1,000	Interest	$1 - $200	NA

SCHEDULE IV -- TRANSACTIONS

Report any purchase, sale, or exchange by you, your spouse, or dependent child during the reporting year of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction exceeded $1,000 Include transactions that resulted in a loss Do not report a transaction between you, your spouse, or your dependent child, or the purchase or sale of your personal residence, unless it is rented out

SP,DC,JT	Asset	Type of Transaction	Date	Amount of Transaction
	Example. Mega Corporation Common Stock	Purchase	10/12/94	$15,001 - $50,000
	NONE			

SCHEDULE V -- LIABILITIES

Report liabilities of over $10,000 owed to any one creditor *at any time* during the reporting period by you, your spouse, or dependent child. Mark the highest amount owed during the year.

Exclude: Any mortgage on your personal residence (unless it is rented out); loans secured by automobiles, household furniture, or appliances, and liabilities owed to a spouse, or the child, parent, or sibling of you or your spouse. Report *revolving charge accounts* only if the balance at the end of the reporting period exceeded $10,000.

SP,DC,JT	Creditor	Type of Liability	Amount of Liability
	Example First Bank of Wilmington, Delaware	Mortgage on 123 Main St., Dover, Del.	$100,001 - $250,000
	NONE		

SCHEDULE VI -- GIFTS

Report the source, a brief description, and the value of all gifts totalling more than $250 received by you, your spouse, or a dependent child from any source during the year
Exclude: Gifts from relatives, gifts of personal hospitality of an individual, local meals, and gifts to a spouse or dependent child that are totally independent of his or her relationship to you. Gifts with a value of $100 or less need not be added towards the $250 disclosure threshold
Note: The gift rule (House Rule 51) prohibits gifts except as specifically provided in the rule

Source	Description	Value
Example. Mr. Joseph H. Smith, Anytown, Anystate	Silver Platter (waiver received from Committee on Standards)	$270
NONE		

SCHEDULE VII -- TRAVEL PAYMENTS AND REIMBURSEMENTS

Identify the source and list travel itinerary, dates, and nature of expenses provided for travel and travel-related expenses totalling more than $250 received by you, your spouse, or a dependent child during the reporting period. Indicate whether a family member accompanied the traveler at the sponsor's expense, and the amount of time, if any, that was not at the sponsor's expense. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor.
Exclude: Travel-related expenses provided by federal, state and local governments, or by a foreign government required to be separately reported under the Foreign Gifts and Decorations Act (5 U.S.C. 7342), travel paid for by a Federal political committee, travel provided to a spouse or dependent child that is totally independent of his or her relationship to you.

Source	Date(s)	Point of Departure--Destination--Point of Return	Lodging? (Y/N)	Food? (Y/N)	Was a Family Member Included? (Y/N)	Any time not at sponsor's expense
Examples: Chicago Chamber of Commerce	Mar.2	Wash., D.C.-Chicago-Wash., D.C.	N	N	N	N
Mega Corporation	Aug.6-13	Wash., D.C.-Los Angeles-Cleveland	Y	Y	Y	4 Days
World Economic Forum, Conference on the Global Agenda, Davos, Switzerland	1/30 - 2/3/97	Wash, DC - Zurich, Switzerland - Wash, DC	Y	Y	N	N
The Aspen Institute and Bipartisan Congressional Retreat Conference, Hershey, PA	3/7-9/97	Wash, DC - Hershey, PA - Wash, DC	Y	Y	Y	N
Fairbank Center for East Asia Research, Harvard University, Asian Pacific Forum, Cambridge, MA	6/27-30/97	Wash, DC - Boston, MA, -Wash, DC	Y	Y	N	N
The Aspen Institute, Conference on US Relations with Russia, Dresden, Germany	8/17-23/97	Wash, DC - Frankfurt, Germany - Dresden, Germany - Wash, DC	Y	Y	Y	N
Stanford University, Conference on NATO after Madrid: Looking to the Future , Palo Alto, CA	9/19-20/97	Wash, DC - San Francisco, CA - Wash, DC	Y	Y	N	N
International Business Association of Southern California, speech, Long Beach, California	11/20-22/97	Wash, DC - Los Angeles, CA - Wash, DC	Y	Y	N	N

SCHEDULE VIII -- POSITIONS

Report all positions, compensated or uncompensated, held during the current calendar year as an officer, director, trustee of an organization, partner, proprietor, representative, employee, or consultant of any corporation, firm, partnership, or other business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States

Exclude: Positions held in any religious, social, fraternal, or political entities, positions solely of an honorary nature, and positions listed on Schedule I

Position	Organization
Board of Trustees	Nebraska Wesleyan University, Lincoln, Nebraska

SCHEDULE IX -- AGREEMENTS

Identify the date, parties to, and general terms of any agreement or arrangement with respect to future employment, a leave of absence during the period of government service, continuation or deferral of payments by a former or current employer other than the U.S. Government, or continuing participation in an employee welfare or benefit plan maintained by a former employer.

Date	Parties To	Terms of Agreement
	NONE	

DOUG BEREUTER
1ST DISTRICT, NEBRASKA

2184 RAYBURN HOUSE OFFICE BUILDING
WASHINGTON, DC 20515-2701
(202) 225-4806

DISTRICT OFFICES
1045 K STREET
LINCOLN, NE 68508
(402) 438-1598

502 N. BROAD ST.
FREMONT, NE 68025
(402) 727-0888

98 MAY 15 AM 10:24

COMMITTEE ON
INTERNATIONAL RELATIONS
VICE CHAIRMAN
SUBCOMMITTEES
ASIA AND THE PACIFIC
Chairman
INTERNATIONAL ECONOMIC
POLICY AND TRADE

COMMITTEE ON BANKING
AND FINANCIAL SERVICES
SUBCOMMITTEES
HOUSING AND COMMUNITY
OPPORTUNITY
FINANCIAL INSTITUTIONS
AND CONSUMER CREDIT
DOMESTIC AND INTERNATIONAL
MONETARY POLICY

Congress of the United States
House of Representatives

HAND DELIVERED

MEMO

To: James Hansen, Chairman, Committee on Standards of Official Conduct
From: Doug Bereuter DB
Subject: 1996 Filing of Financial Disclosure
Date: May 6, 1998

In examing the filing forms for the 1997 Financial Disclosure, I realized that I should have filed a Schedule IV form for 1996 with one entry – the sale of the U.S.A.A. (San Antonio, Texas) mutual fund holding of my dependent son, Kirk. The contents of that fund were entirely sold on August 23, 1996, for $25,664.33 and were transferred to his savings account with Calvert Group of Kansas City, Missouri, which was listed on the Schedule III form of the 1996 Financial Disclosure.

DOUG BEREUTER
1st District, Nebraska

2184 Rayburn House Office Building
Washington, DC 20515-2701
202-225-4806

District Offices
1045 K Street
Lincoln, NE 68508
402-438-1598

502 N. Broad St
Fremont, NE 68025
402-727-0888

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HAND DELIVERED

Committee on International Relations
Vice Chairman
Subcommittees:
Asia and the Pacific
Chairman
International Operations
Policy and Trade

Committee on Banking and Financial Services
Subcommittees:
Housing and Community Opportunity
Financial Institutions and Consumer Credit
Domestic and International Monetary Policy

Congress of the United States

House of Representatives

May 18, 1998

Ms. Robin Carle
Clerk of The House
H154 Capitol
Washington, D.C. 20515

V
MC

13

Dear Ms. Carle:

I would like to amend Schedule III -- Assets and "Unearned" Income for my 1997 Financial Disclosure. Incorrect information was inadvertently provided by unnecessarily repeating the information in a column included in this schedule regarding property in Summit County, Colorado, and Reno County, Kansas. Enclosed is the correct Schedule III for page five to be attached to the 1997 Financial Disclosure; it should replace the Schedule III page originally submitted.

Thank you.

Best wishes,

Doug Bereuter

DOUG BEREUTER
Member of Congress

DB/re

Enclosure

RECEIVED
93 MAY 15 AM 10:24
93 MAY 20 PM 12:58
OFFICE OF THE CLERK
U.S. HOUSE OF REPRESENTATIVES
HAND DELIVERED

UNITED STATES HOUSE OF REPRESENTATIVES
FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1997

Form A
For use by Members, officers, and employees

DOUGLAS KENT BEREUTER
(Full Name)

2184 Rayburn Building
(Mailing Address)

Washington DC 20515

Daytime Telephone: (202) 225-4806

(Office Use Only)

Filer Status						
	[X]	Member of the U S House of Representatives	State/District: NE 01	[ ]	Officer or Employee	Employing Office
Report Type	[X]	Annual (May 15)	[X]	Amendment	[ ]	Termination Date: Termination

A $200 penalty shall be assessed against anyone who files more than 30 days late.

PRELIMINARY INFORMATION -- ANSWER EACH OF THESE QUESTIONS

I. Did you or your spouse have "earned" income (e.g., salaries or fees) of $200 or more from any source in the reporting period?
If yes, complete and attach Schedule I. Yes [X] No [ ]

II. Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period?
If yes, complete and attach Schedule II. Yes [ ] No [X]

III. Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period?
If yes, complete and attach Schedule III. Yes [X] No [ ]

IV. Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset worth more than $1,000 in the reporting period?
If yes, complete and attach Schedule IV. Yes [ ] No [X]

V. Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period?
If yes, complete and attach Schedule V. Yes [ ] No [X]

VI. Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $250 and not otherwise exempt)?
If yes, complete and attach Schedule VI. Yes [ ] No [X]

VII. Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $250 from one source)?
If yes, complete and attach Schedule VII. Yes [X] No [ ]

VIII. Did you hold any reportable positions on or before the date of filing in the current calendar year?
If yes, complete and attach Schedule VIII. Yes [X] No [ ]

IX. Did you have any reportable agreement or arrangement with an outside entity?
If yes, complete and attach Schedule IX. Yes [ ] No [X]

Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION -- ANSWER EACH OF THESE QUESTIONS

TRUSTS - Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child? Yes [ ] No [X]

EXEMPTION. Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption? Yes [ ] No [X]

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SIGNATURE OF REPORTING INDIVIDUAL: Douglas K. Bereuter

DATE (Month/Day/Year): May 12, 1998

SCHEDULE III -- ASSETS AND "UNEARNED" INCOME

JT	Checking Account, Cornhusker Bank, Lincoln, Nebraska	$1,001 - $15,000	Interest	$1 - $200	NA
	One-quarter shareholder in family corp. owning 38 acres of land & residence in unincorporated portion of Summit County, CO & a parcel with storage building in Utica, NB; & shared interest with extended family of farmland & pastureland in Reno County, KS.	$100,001 - $250,000	Not available	None	NA
	My individual interest in Reno County real estate is 1/24 and 1/36 of separate parcels. No earned income.				
DC	NOW Account, First Virginia Bank, Falls Church, Virginia (Kirk Bereuter)	$1 - $1,000	Interest	$1 - $200	NA
JT	Mutual Funds, U.S.A.A., San Antonio, Texas	$1,001 - $15,000	Capital Gains and Dividends	$201 - $1,000	NA
SP	403B(7) Account, U.S.A.A., San Antonio, Texas	$50,001 - $100,000	Not available	NA	NA
DC	Merchantile Bank, Checking Account, Kansas City, MO (Kirk Bereuter)	$1 - $1,000	Not available	None	NA
JT	U.S.A.A. Federal Savings Bank, San Antonio, Texas	$1 - $1,000	Interest	$1 - $200	NA

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1997

FORM A
For use by Members, officers, and employees

RECEIVED
98 MAY 15 AM 9:56

CONGRESSMAN HOWARD L. BERMAN
(Full Name)

2330 Rayburn Building
(Mailing Address)

Washington, D.C. 20515

202 225-4695
Daytime Telephone

HC (Office Use Only) (9)

Filer Status	[X] Member of the U.S. House of Representatives	State CA District 26th	[X] Officer or Employee	Employing Office HOWARD L. BERMAN	Termination Date
Report Type	[X] Annual (May 15)	[ ] Amendment		[ ] Termination	

A *$200 penalty* shall be assessed against anyone who files more than 30 days late.

PRELIMINARY INFORMATION — ANSWER EACH OF THESE QUESTIONS

I. Did you or your spouse have "earned" income (e.g., salaries or fees) of $200 or more from any source in the reporting period? **If yes, complete and attach Schedule I.** — Yes [X] No [ ]

II. Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? **If yes, complete and attach Schedule II.** — Yes [X] No [ ]

III. Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? **If yes, complete and attach Schedule III.** — Yes [ ] No [X]

IV. Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset worth more than $1,000 in the reporting period? **If yes, complete and attach Schedule IV.** — Yes [ ] No [X]

V. Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? **If yes, complete and attach Schedule V.** — Yes [X] No [ ]

VI. Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $250 and not otherwise exempt)? **If yes, complete and attach Schedule VI.** — Yes [ ] No [X]

VII. Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $250 from one source)? **If yes, complete and attach Schedule VII.** — Yes [X] No [ ]

VIII. Did you hold any reportable positions on or before the date of filing in the current calendar year? **If yes, complete and attach Schedule VIII** — Yes [ ] No [X]

IX. Did you have any reportable agreement or arrangement with an outside entity? **If yes, complete and attach Schedule IX.** — Yes [ ] No [X]

Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION — ANSWER EACH OF THESE QUESTIONS

TRUSTS—Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child? — Yes [ ] No [X]

EXEMPTION—Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption? — Yes [ ] No [X]

CERTIFICATION — THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended. The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct or its designee. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil penalties and criminal sanctions (*See* 5 U.S.C. app. 4, §104 and 18 U.S.C. §1001)

SIGNATURE OF REPORTING INDIVIDUAL: Howard L. Berman

DATE (Month/Day/Year): 5/15/98

SCHEDULE I — EARNED INCOME

List the source, type, and amount of earned income from any source (other than the filer's current employment by the U.S. Government) totalling $200 or more during the preceding calendar year. For a spouse, list the source and amount of any honoraria; list only the source for other spouse earned income exceeding $1,000.

	Source	Type	Amount
Examples	Keene State	Approved Teaching Fee	$6,000
	State of Maryland	Legislative Pension	$9,000
	Civil War Roundtable (Oct. 2nd)	Spouse Speech	$1,000
	Ontario County Board of Education	Spouse Salary	NA
	L.A. Jewish Journal	Spouse counselling fee	$500.00

For payments to charity in lieu of honoraria, use Schedule II.

SCHEDULE II — PAYMENTS IN LIEU OF HONORARIA MADE TO CHARITY

List the source, activity (i.e., speech, appearance, or article), date, and amount of any payment made by the sponsor of an event to a charitable organization in lieu of an honorarium. A separate confidential list of charities receiving such payments must be filed directly with the Committee on Standards of Official Conduct. An envelope for transmitting the list is included in each Member's filing package.

Source	Activity	Date	Amount
Examples Association of American Associations, Wash., D.C. XYZ Magazine	Speech Article	Feb. 2, 1997 Aug. 13, 1997	$2,000 $500
CA Cable TV Association Oakland, CA	Speech	Dec. 12,1997	$1,000.00

This page may be copied if more space is required.

Name HOWARD L. BERMAN | Page 4 of 9

SCHEDULE III — ASSETS AND "UNEARNED" INCOME

BLOCK A — Asset and/or Income Source

Identify (a) each asset held for investment or production of income with a fair market value exceeding $1,000 at the end of the reporting year, and (b) any other asset or source of income which generated more than $200 in "unearned" income during the year. For rental property or land, provide an address. Provide full names of any mutual funds. For an IRA or retirement plan that is *self-directed*, list the underlying assets worth more than $1,000. For an IRA or retirement plan that is not selfdirected, name the institution holding the account.

Exclude: Your personal residence(s) (unless there is rental income), any debt owed to you by your spouse, or by your or your spouse's child, parent, or sibling, any deposits totalling $5,000 or less in personal savings accounts, any financial interests in or income derived from U.S. Government retirement programs.

If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC) or is jointly held (JT), in the optional column on the far left.

BLOCK B — Value of Asset

at close of reporting year
If you use a valuation method other than fair market value, please specify the method used
If an asset was sold and is included only because it generated income, the value should be "None."

BLOCK C — Type of Income

BLOCK D — Amount of Income

For IRA's and retirement plans that are *not* self-directed, you may write in "NA" for income

BLOCK E — Transaction

Indicate if asset was purchased (P), sold (S), or exchanged (E) in reporting year

	BLOCK A	BLOCK B												BLOCK C							BLOCK D										BLOCK E
		A None	B $1 – $1,000	C $1,001 – $15,000		E $15,001 – $50,000	F $50,001 – $100,000	G $100,001 – $250,000	H $250,001 – $500,000	I $500,001 – $1,000,000	J $1,000,001 – $5,000,000	K $5,000,001 – $25,000,000	L $25,000,001 – $50,000,000	Over $50,000,000	DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Type of Income (Specify. For Example: Partnership Income or Farm Income)	I None	II $1 – $200	III $201 – $1,000	IV $1,001 – $2,500	V $2,501 – $5,000	VI $5,001 – $15,000	VII $15,001 – $50,000	VIII $50,001 – $100,000	IX $100,001 – $1,000,000	X $1,000,001 – $5,000,000	XI Over $5,000,000	P, S, E
SP	Mega Corp. Stock					X									X																P
DC	*Examples* Simon & Schuster			Indefinite																	Royalties										
JT	1st Bank of Paducah KY accounts						X									X										X					
	NONE																														

For additional assets and unearned income, use next page.

SCHEDULE III — ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Name HOWARD L. BERMAN | Page 5 of 9

SP. DC. JT	BLOCK A Asset and/or Income Source	BLOCK B Year-End Value of Asset												BLOCK C Type of Income						BLOCK D Amount of Income											BLOCK E Transaction
		A None	B $1 – $1,000	C $1,001 – $15,000	D $15,001 – $50,000	E $50,001 – $100,000	F $100,001 – $250,000	G $250,001 – $500,000	H $500,001 – $1,000,000	I $1,000,001 – $5,000,000	J $5,000,001 – $25,000,000	K $25,000,001 – $50,000,000	L Over $50,000,000	DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Type of Income (Specify)	I None	II $1 – $200	III $201 – $1,000	IV $1,001 – $2,500	V $2,501 – $5,000	VI $5,001 – $15,000	VII $15,001 – $50,000	VIII $50,001 – $100,000	IX $100,001 – $1,000,000	X $1,000,001 – $5,000,000	XI Over $5,000,000	P S E

This page may be copied if more space is required.

SCHEDULE IV — TRANSACTIONS

Name HOWARD L. BERMAN | Page 6 of 9

Report any purchase, sale, or exchange by you, your spouse, or dependent child during the reporting year of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child, or the purchase or sale of your personal residence, unless it is rented out.

SP, DC, JT	Asset	Type of Transaction: PURCHASE	SALE	EXCHANGE	Date (MO/DAY/YR)	Amount of Transaction: B ($1,001–$15,000)	C ($15,001–$50,000)	D ($50,001–$100,000)	E ($100,001–$250,000)	F ($250,001–$500,000)	G ($500,001–$1,000,000)	H ($1,000,001–$5,000,000)	I ($5,000,001–$25,000,000)	J ($25,000,001–$50,000,000)	K (Over $50,000,000)
SP	*Example* Mega Corporation Common Stock	X			10-12-97		X								
	NONE														

This page may be copied if more space is required.

SCHEDULE V — LIABILITIES

Report liabilities of over $10,000 owed to any one creditor ***at any time*** during the reporting period by you, your spouse, or dependent child. Mark the highest amount owed during the year. **Exclude:** Any mortgage on your personal residence (unless it is rented out), loans secured by automobiles, household furniture, or appliances, and liabilities owed to a spouse, or the child, parent, or sibling of you or your spouse. Report ***revolving charge accounts*** only if the balance at the end of the reporting period exceeded $10,000.

SP, DC, JT	Creditor	Type of Liability	Amount of Liability									
			B $10,001 – $15,000	C $15,001 – $50,000	D $50,001 – $100,000	E $100,001 – $250,000	F $250,001 – $500,000	G $500,001 – $1,000,000	H $1,000,001 – $5,000,000	I $5,000,001 – $25,000,000	J $25,000,001 – $50,000,000	K Over $50,000,000
	Example First Bank of Wilmington Delaware	Mortgage on 123 Main St., Dover, Del				X						
	Congressional Federal Credit Union	Loan	X									
	Citibank	Credit Card Revolving Account		X								

SCHEDULE VI — GIFTS

Report the source, a brief description, and the value of all gifts totalling more than $250 received by you, your spouse, or a dependent child from any source during the year.

Exclude: Gifts from relatives, gifts of personal hospitality of an individual (local meals), and gifts to a spouse or dependent child that are totally independent of his or her relationship to you. Gifts with a value of $100 or less need not be added towards the $250 disclosure threshold.

Note: The gift rule (House Rule 51) prohibits gifts except as specifically provided in the rule.

Source	Description	Value
Example Mr. Joseph H. Smith, Anytown, Anystate	Silver Platter (determination on personal friendship received from Committee on Standards)	$270
NONE		

Use additional sheets if more space is required.

SCHEDULE VII —TRAVEL PAYMENTS AND REIMBURSEMENTS

Identify the source and list travel itinerary, dates, and nature of expenses provided for travel and travel-related expenses totalling more than $250 received by you, your spouse, or a dependent child during the reporting period. Indicate whether a family member accompanied the traveler at the sponsor's expense, and the amount of time, if any, that was not at the sponsor's expense. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor.

Exclude: Travel-related expenses provided by federal, state, and local governments, or by a foreign government required to be separately reported under the Foreign Gifts and Decorations Act (5 U.S.C. § 7342); travel paid for by a Federal political committee, travel provided to a spouse or dependent child that is totally independent of his or her relationship to you.

Source	Date(s)	Point of Departure—Destination—Point of Return	Lodging? (Y/N)	Food? (Y/N)	Was a Family Member Included? (Y/N)	Any time not at sponsor's expense
Examples Chicago Chamber of Commerce	Mar 2	Wash , D C —Chicago—Wash , D C	N	N	N	N
Roycroft Corporation	Aug. 6–13	Wash , D C —Los Angeles—Cleveland	Y	Y	Y	4 Days
World Economic Forum	1/29-2/3	L.A.-Davos-L.A.	Y	Y	Y	N
Nixon Center for Peace and Freedom	5/8-9	NO reimbursement expenses	Y	Y	N	N
Center for Strategic & International Studies	6/30-7/3	L.A.-Hong Kong-L.A.	Y	Y	Y	N
Aspen Institute	8/17-23	L.A.-Dresden-L.A.	Y	Y	Y	N
German Marshall Fund of the U.S.	8/23-26	Dresden-Berlin	Y	Y	Y	N
AIPAC	10/31 -11/2	WDC-Ft.Lauderdale/L.A.	Y	Y	Y	N
CA Cable TV	12/12	NO reimbursement expenses	N	Y	N	N

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SCHEDULE VIII — POSITIONS

Report all positions, compensated or uncompensated, held during the current calendar year as an officer, director, trustee of an organization, partner, proprietor, representative, employee, or consultant of any corporation, firm, partnership, or other business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States.

Exclude: Positions held in any religious, social, fraternal, or political entities, positions solely of an honorary nature; and positions listed on Schedule I

Position	Name of Organization
NONE	

SCHEDULE IX — AGREEMENTS

Identify the date, parties to, and general terms of any agreement or arrangement with respect to: future employment, a leave of absence during the period of government service; continuation or deferral of payments by a former or current employer other than the U S Government, or continuing participation in an employee welfare or benefit plan maintained by a former employer.

Date	Parties To	Terms of Agreement
	NONE	

GPO 1998 46-260 (mac)

Use additional sheets if more space is required.

26TH DISTRICT, CALIFORNIA
COMMITTEES
INTERNATIONAL RELATIONS
RANKING MEMBER, SUBCOMMITTEE ON ASIA AND THE PACIFIC
JUDICIARY
STANDARDS OF OFFICIAL CONDUCT
RANKING MEMBER

HAND DELIVERED

98 MAY 19 PM 2:14

Congress of the United States
House of Representatives
Washington, DC 20515–0526

WASHINGTON, DC 20515–0
(202) 225–4695
DISTRICT OFFICE:
[illegible] SEPULVEDA BLVD
SUITE 330
MISSION HILLS, CA 91345
818) 891-0543
818) 764-1206

HOWARD L. BERMAN

May 19, 1998

(2)

The Clerk
U.S. House of Representatives
B-106 Cannon HOB

RE: Amendment to Financial Disclosure

Please amend "Page 2" of my 1997 Financial Disclosure form as follows:

Remove: Spouse "counselling" fee
Change to: Spouse "consulting" fee

Thank you for your assistance in this regard.

Sincerely,

Howard L. Berman

HOWARD L. BERMAN
MEMBER OF CONGRESS

Name HCWARD L. BERMAN	Page 2 of 9

SCHEDULE I — EARNED INCOME

List the source, type, and amount of earned income from any source (other than the filer's current employment by the U.S. Government) totalling $200 or more during the preceding calendar year. For a spouse, list the source and amount of any honoraria; list only the source for other spouse earned income exceeding $1,000.

Source	Type	Amount
Examples: Keene State	Approved Teaching Fee	$6,000
State of Maryland	Legislative Pension	$9,000
Civil War Roundtable (Oct. 2nd)	Spouse Speech	$1,000
Ontario County Board of Education	Spouse Salary	NA
L.A. Jewish Journal	Spouse counselling fee	$500.00

For payments to charity in lieu of honoraria, use Schedule II.

26TH DISTRICT, CALIFORNIA
COMMITTEES
INTERNATIONAL RELATIONS
RANKING MEMBER, SUBCOMMITTEE ON ASIA AND THE PACIFIC
JUDICIARY
STANDARDS OF OFFICIAL CONDUCT
RANKING MEMBER

Congress of the United States
House of Representatives
Washington, DC 20515-0526

WASHINGTON, DC 20515-0526
(202) 225-4695
DISTRICT OFFICE:
[illegible]
SUITE 300
MISSION HILLS, CA 91345
818) 891-[illegible]543
818) 764-[illegible]216

HOWARD L. BERMAN

June 10, 1998

HAND DELIVERED

3

M

98 JUN 10 AM 11:53

The Clerk
U.S. House of Representatives
B-106 Cannon HOB

RE: Amendment to Financial Disclosure

Please amend Schedule III of my 1997 and all previous Financial Disclosure Forms as follows:

Block A: Please amend to read CALPERS: Legislators Retirement System.
Block B: Please amend to check in column "D"
Block C: Please amend to read "n/a"
Block D: Please amend to read "n/a"

Thank you very much.

Sincerely,

Howard L. Berman

HOWARD L. BERMAN
Member of Congress

SCHEDULE III — ASSETS AND "UNEARNED" INCOME

Name HOWARD L. BERMAN | Page 4 of 9

BLOCK A — Asset and/or Income Source

Identify (a) each asset held for investment or production of income with a fair market value exceeding $1,000 at the end of the reporting year, and (b) any other asset or source of income which generated more than $200 in "unearned" income during the year. For rental property or land, provide an address. Provide full names of any mutual funds. For an IRA or retirement plan that is *self-directed*, list the underlying assets worth more than $1,000. For an IRA or retirement plan that is not selfdirected, name the institution holding the account.

Exclude: Your personal residence(s) (unless there is rental income), any debt owed to you by your spouse, or by your or your spouse's child, parent, or sibling, any deposits totalling $5,000 or less in personal savings accounts, any financial interests in or income derived from U.S. Government retirement programs.

If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC) or is jointly held (JT), in the optional column on the far left.

BLOCK B — Value of Asset at close of reporting year. If you use a valuation method other than fair market value, please specify the method used. If an asset was sold and is included only because it generated income, the value should be "None."

BLOCK C — Type of Income

BLOCK D — Amount of Income For IRA's and retirement plans that are *not* self-directed, you may write in "NA" for income.

BLOCK E — Transaction Indicate if asset was purchased (P), sold (S), or exchanged (E) in reporting year.

	BLOCK A		Block B: A None	B $1 – $1,000	C $1,001 – $15,000	D $15,001 – $50,000	E $50,001 – $100,000	F $100,001 – $250,000	G $250,001 – $500,000	H $500,001 – $1,000,000	I $1,000,001 – $5,000,000	J $5,000,001 – $25,000,000	K $25,000,001 – $50,000,000	L Over $50,000,000	Block C: DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Type of Income (Specify: For Example, Partnership Income or Farm Income)	Block D: I None	II $1 – $200	III $201 – $1,000	IV $1,001 – $2,500	V $2,501 – $5,000	VI $5,001 – $15,000	VII $15,001 – $50,000	VIII $50,001 – $100,000	IX $100,001 – $1,000,000	X $1,000,001 – $5,000,000	XI Over $5,000,000	Block E: P, S, E
SP	*Examples*	SP	Mega Corp Stock				X								X																	P
DC			Simon & Schuster			Indefinite															Royalties				X					X			
JT			1st Bank of Paducah, KY accounts					X								X										X						
			CALPERS: Legislators Retirement System — As Amended —			X										n/a								n/a								

For additional assets and unearned income, use next page.

SCHEDULE III — ASSETS AND "UNEARNED" INCOME

Name HOWARD L. BERMAN | Page 4 of 9

BLOCK A — Asset and/or Income Source

Identify (a) each asset held for investment or production of income with a fair market value exceeding $1,000 at the end of the reporting year, and (b) any other asset or source of income which generated more than $200 in "unearned" income during the year. For rental property or land, provide an address. Provide full names of any mutual funds. For an IRA or retirement plan that is *self-directed*, list the underlying assets worth more than $1,000. For an IRA or retirement plan that is not selfdirected, name the institution holding the account.

Exclude: Your personal residence(s) (unless there is rental income), any debt owed to you by your spouse, or by your or your spouse's child, parent, or sibling; any deposits totalling $5,000 or less in personal savings accounts, any financial interests in or income derived from U.S. Government retirement programs.

If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC) or is jointly held (JT), in the optional column on the far left.

BLOCK B — Value of Asset

at close of reporting year. If you use a valuation method other than fair market value, please specify the method used. If an asset was sold and is included only because it generated income, the value should be "None."

BLOCK C — Type of Income

BLOCK D — Amount of Income

For IRA's and retirement plans that are *not* self-directed, you may write in "NA" for income.

BLOCK E — Transaction

Indicate if asset was purchased (P), sold (S), or exchanged (E) in reporting year.

	BLOCK A: Asset and/or Income Source		BLOCK B: Value of Asset												BLOCK C: Type of Income							BLOCK D: Amount of Income											BLOCK E: Transaction
			A None	B $1 – $1,000	C $1,001 – $15,000		E $15,001 – $50,000	F $50,001 – $100,000	G $100,001 – $250,000	H $250,001 – $500,000	I $500,001 – $1,000,000	J $1,000,001 – $5,000,000	K $5,000,001 – $25,000,000	L $25,000,001 – $50,000,000	Over $50,000,000	DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Type of Income (Specify. For Example, Partnership Income or Farm Income)	I None	II $1 – $200	III $201 – $1,000	IV $1,001 – $2,500	V $2,501 – $5,000	VI $5,001 – $15,000	VII $15,001 – $50,000	VIII $50,001 – $100,000	IX $100,001 – $1,000,000	X $1,000,001 – $5,000,000	XI Over $5,000,000	P, S, E
SP, DC, JT	*Examples*	SP	Mega Corp. Stock				X									X																	P
			Simon & Schuster	Indefinite																		Royalties											
			1st Bank of Paducah, KY accounts					X									X									X					X		
	NONE																																
	— As Submitted —																																

For additional assets and unearned income, use next page.

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1997

FORM A
For use by Members, officers and employees

RECEIVED
98 MAY 15 PM 8 52
OFFICE OF PUBLIC RECORD
HOUSE OF REPRESENTATIVES
INSIDE MAIL (9)
MC
(Office Use Only)

ROBERT MARION BERRY
(Full Name)

1407 Longworth, Washington, D.C. 20515
(Mailing Address)

(202) 225-4076
Daytime Telephone

Filer Status: [X] Member of the U.S. House of Representatives — State: Arkansas, District: First; [ ] Officer or Employee — Employing Office:

Report Type: [ ] Annual (May 15); [ ] Amendment; [ ] Termination — Termination Date:

A *$200 penalty* shall be assessed against anyone who files more than 30 days late.

PRELIMINARY INFORMATION — ANSWER EACH OF THESE QUESTIONS

I. Did you or your spouse have "earned" income (e.g., salaries or fees) of $200 or more from any source in the reporting period?
If yes, complete and attach Schedule I — Yes [X] No [ ]

II. Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period?
If yes, complete and attach Schedule II — Yes [ ] No [X]

III. Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period?
If yes, complete and attach Schedule III — Yes [X] No [ ]

IV. Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset worth more than $1,000 in the reporting period?
If yes, complete and attach Schedule IV. — Yes [ ] No [X]

V. Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period?
If yes, complete and attach Schedule V. — Yes [ ] No [X]

VI. Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $250 and not otherwise exempt)?
If yes, complete and attach Schedule VI — Yes [ ] No [X]

VII. Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $250 from one source)?
If yes, complete and attach Schedule VII — Yes [X] No [ ]

VIII. Did you hold any reportable positions on or before the date of filing in the current calendar year?
If yes, complete and attach Schedule VIII — Yes [X] No [ ]

IX. Did you have any reportable agreement or arrangement with an outside entity?
If yes, complete and attach Schedule IX — Yes [X] No [ ]

Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION — ANSWER EACH OF THESE QUESTIONS

TRUSTS—Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child? — Yes [ ] No [X]

EXEMPTION—Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption? — Yes [ ] No [X]

CERTIFICATION — THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended. The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct or its designee. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil penalties and criminal sanctions (*See* 5 U.S.C. app. 4, §104 and 18 U.S.C. §1001).

SIGNATURE OF REPORTING INDIVIDUAL: Robert Marion Berry

DATE (Month/Day/Year): 5-14-98

300

Name ROBERT MARION BERRY	Page 1 of 8

SCHEDULE I — EARNED INCOME

List the source, type, and amount of earned income from any source (other than the filer's current employment by the U.S. Government) totalling $200 or more during the preceding calendar year. For a spouse, list the source and amount of any honoraria, list only the source for other spouse earned income exceeding $1,000

Source	Type	Amount
Examples: Keene State	Approved Teaching Fee	$6,000
State of Maryland	Legislative Pension	$9,000
Civil War Roundtable (Oct. 2nd)	Spouse Speech	$1,000
Ontario County Board of Education	Spouse Salary	NA
Carmar Lowe, Inc. (Spouse)	Spouse Director Fee	$1,200.00
Marion Berry, Inc. (Spouse)	Spouse Salary	$23,800.00

For payments to charity in lieu of honoraria, use Schedule II

SCHEDULE II — PAYMENTS IN LIEU OF HONORARIA MADE TO CHARITY

List the source, activity (i e , speech, appearance, or article), date, and amount of any payment made by the sponsor of an event to a charitable organization in lieu of an honorarium. A separate confidential list of charities receiving such payments must be filed directly with the Committee on Standards of Official Conduct. An envelope for transmitting the list is included in each Member's filing package.

Source	Activity	Date	Amount
Examples Association of American Associations, Wash., D.C.	Speech	Feb. 2, 1997	$2,000
XYZ Magazine	Article	Aug. 13, 1997	$500
None			

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SCHEDULE III — ASSETS AND "UNEARNED" INCOME

BLOCK A — Asset and/or Income Source

Identify (a) each asset held for investment or production of income with a fair market value exceeding $1,000 at the end of the reporting year, and (b) any other asset or source of income which generated more than $200 in "unearned" income during the year. For rental property or land, provide an address. Provide full names of any mutual funds. For an IRA or retirement plan that is *self-directed*, list the underlying assets worth more than $1,000. For an IRA or retirement plan that is not self-directed, name the institution holding the account.

Exclude: Your personal residence(s) (unless there is rental income), any debt owed to you by your spouse, or by your or your spouse's child, parent, or sibling; any deposits totalling $5,000 or less in personal savings accounts; any financial interests in or income derived from U.S. Government retirement programs.

If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC) or is jointly held (JT), in the optional column on the far left.

SP		SP Mega Corp. Stock
DC	*Examples*	Simon & Schuster
JT		1st Bank of Paducah KY accounts

BLOCK B — Value of Asset at close of reporting year. If you use a valuation method other than fair market value, please specify the method used. If an asset was sold and is included only because it generated income, the value should be "None."

A	B	C	E	F	G	H	I	J	K	L
None	$1 – $1,000	$1,001 – $15,000	$15,001 – $50,000	$50,001 – $100,000	$100,001 – $250,000	$250,001 – $500,000	$500,001 – $1,000,000	$1,000,001 – $5,000,000	$5,000,001 – $25,000,000	$25,000,001 – $50,000,000	Over $50,000,000
		Indefinite		X							
					X						

BLOCK C — Type of Income

DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Type of Income (Specify. For Example, Partnership Income or Farm Income)
X						
		X				Royalties

BLOCK D — Amount of Income For IRA's and retirement plans that are *not* self-directed, you may write in "NA" for income.

I	II	III	IV	V	VI	VII	VIII	IX	X	XI
None	$1 – $200	$201 – $1,000	$1,001 – $2,500	$2,501 – $5,000	$5,001 – $15,000	$15,001 – $50,000	$50,001 – $100,000	$100,001 – $1,000,000	$1,000,001 – $5,000,000	Over $5,000,000
			X							
					X			X		

BLOCK E — Transaction Indicate if asset was purchased (P), sold (S), or exchanged (E) in reporting year.

	A	B	C	E	F	G	H	I	J	K	L	DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Type of Income	I	II	III	IV	V	VI	VII	VIII	IX	X	XI	BLOCK E
SP	Marion Berry, Inc.				X													Salary							X					
	Pecan Post, Inc.						X											Partnership Income	X											
	Berry Land Co.				X																				X					
	Greenhead Hunting Club, of Gillett, Inc.		X															Directors Fee	X											
SP	Carmar Lowe, Inc.			X																		X								P

For additional assets and unearned income, use next page.

SCHEDULE III — ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Name ROBERT MARION BERRY | Page 4 of 8

BLOCK A: Asset and/or Income Source	SP / DC / JT	BLOCK B: Year-End Value of Asset											BLOCK C: Type of Income							BLOCK D: Amount of Income										BLOCK F: Transaction
		A None	B $1 – $1,000	C $1,001 – $15,000	D $15,001 – $50,000	E $50,001 – $100,000	F $100,001 – $250,000	G $250,001 – $500,000	H $500,001 – $1,000,000	I $1,000,001 – $5,000,000	J $5,000,001 – $25,000,000	K $25,000,001 – $50,000,000	L Over $50,000,000	DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Type of Income (Specify)	I None	II $1 – $200	III $201 – $1,000	IV $1,001 – $2,500	V $2,501 – $5,000	VI $5,001 – $15,000	VII $15,001 – $50,000	VIII $50,001 – $100,000	IX $100,001 – $1,000,000	X $1,000,001 – $5,000,000	XI Over $5,000,000	P S F
Riceland Foods, Inc.					X																X										
Planters & Merchants Bank of Gillett, AR				X										X									X								
Southern Farm Bureau Life Insurance Co.				X										X								X									
140 Main St. Gillett, AR			X																		X										
Marion Berry, Inc. Profit Sharing Plan							X									X									X						
(a) U.S. Treasury Bonds							X									X									X						E
(Blank)																															
(Blank)																															
New York Life Insurance					X																X										
NW National Life Insurance				X																	X										
Planters & Merchants Bank of Gillett, AR				X												X							X								

This page may be copied if more space is required.

SCHEDULE IV — TRANSACTIONS

Name ROBERT MARION BERRY | Page 5 of 8

Report any purchase, sale, or exchange by you, your spouse, or dependent child during the reporting year of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child, or the purchase or sale of your personal residence, unless it is rented out.

SP, DC, JT	Asset	Type of Transaction: PURCHASE	SALE	EXCHANGE	Date (MO/DAY/YR)	Amount of Transaction: B ($1,001–$15,000)	C ($15,001–$50,000)	D ($50,001–$100,000)	E ($100,001–$250,000)	F ($250,001–$500,000)	G ($500,001–$1,000,000)	H ($1,000,001–$5,000,000)	I ($5,000,001–$25,000,000)	J ($25,000,001–$50,000,000)	K (Over $50,000,000)
SP	*Example* Mega Corporation Common Stock	X			10-12-97		X								
	U.S. Treasury Bonds Marion Berry, Inc. Profit Sharing Plan exchanged gold contracts and certificates of deposits for U.S. Treasury Bonds			X	1997				X						

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SCHEDULE V — LIABILITIES

Report liabilities of over $10,000 owed to any one creditor ***at any time*** during the reporting period by you, your spouse, or dependent child. Mark the highest amount owed during the year. **Exclude:** Any mortgage on your personal residence (unless it is rented out), loans secured by automobiles, household furniture, or appliances, and liabilities owed to a spouse, or the child, parent, or sibling of you or your spouse. Report ***revolving charge accounts*** only if the balance at the end of the reporting period exceeded $10,000.

SP, DC, JT	Creditor	Type of Liability	Amount of Liability									
			B $10,001– $15,000	C $15,001– $50,000	D $50,001– $100,000	E $100,001– $250,000	F $250,001– $500,000	G $500,001– $1,000,000	H $1,000,001– $5,000,000	I $5,000,001– $25,000,000	J $25,000,001– $50,000,000	K Over $50,000,000
Example	First Bank of Wilmington, Delaware	Mortgage on 123 Main St., Dover, Del				x						
	None											

SCHEDULE VI — GIFTS

Report the source, a brief description, and the value of all gifts totalling more than $250 received by you, your spouse, or a dependent child from any source during the year.

Exclude: Gifts from relatives, gifts of personal hospitality of an individual, local meals, and gifts to a spouse or dependent child that are totally independent of his or her relationship to you. Gifts with a value of $100 or less need not be added towards the $250 disclosure threshold.

Note: The gift rule (House Rule 51) prohibits gifts except as specifically provided in the rule.

Source	Description	Value
Example Mr. Joseph H. Smith, Anytown, Anystate	Silver Platter (determination on personal friendship received from Committee on Standards)	$270
None		

Use additional sheets if more space is required.

SCHEDULE VII —TRAVEL PAYMENTS AND REIMBURSEMENTS

Identify the source and list travel itinerary, dates, and nature of expenses provided for travel and travel-related expenses totalling more than $250 received by you, your spouse, or a dependent child during the reporting period. Indicate whether a family member accompanied the traveler at the sponsor's expense, and the amount of time, if any, that was not at the sponsor's expense. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor

Exclude: Travel-related expenses provided by federal, state, and local governments, or by a foreign government required to be separately reported under the Foreign Gifts and Decorations Act (5 U.S.C § 7342); travel paid for by a Federal political committee; travel provided to a spouse or dependent child that is totally independent of his or her relationship to you

	Source	Date(s)	Point of Departure—Destination—Point of Return	Lodging? (Y/N)	Food? (Y/N)	Was a Family Member Included? (Y/N)	Any time not at sponsor's expense
Examples	Chicago Chamber of Commerce	Mar 2	Wash . D C —Chicago—Wash . D C	N	N	N	N
	Roycroft Corporation	Aug 6–13	Wash . D C —Los Angeles—Cleveland	Y	Y	Y	4 Days
	National Urban & Community	11-2-97					
	Conservation Conference	11-3-97	Wash., D.C.-Columbus, OH-Wash., D.C.	Y	Y	N	N

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SCHEDULE VIII — POSITIONS

Report all positions, compensated or uncompensated, held during the current calendar year as an officer, director, trustee of an organization, partner, proprietor, representative, employee, or consultant of any corporation, firm, partnership, or other business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States

Exclude: Positions held in any religious, social, fraternal, or political entities, positions solely of an honorary nature, and positions listed on Schedule I

Position	Name of Organization
Partner	Berry Land Co.
President/Secretary	Greenhead Hunting Club of Gillett, AR, Inc.
Director/Secretary	Carmar Lowe, Inc. (Spouse)

SCHEDULE IX — AGREEMENTS

Identify the date, parties to, and general terms of any agreement or arrangement with respect to future employment, a leave of absence during the period of government service; continuation or deferral of payments by a former or current employer other than the U.S Government, or continuing participation in an employee welfare or benefit plan maintained by a former employer

Date	Parties To	Terms of Agreement
10/93	Marion Berry, Inc.	I will retain my benefits under the profit sharing plan of Marion Berry, Inc.
10/93	Marion Berry, Inc.	I will return to my employment with Marion Berry, Inc. upon leaving government service.
10/93	Greenhead Hunting Club of Gillett, AR, Inc.	I will return to my employment with Greenhead Hunting Club of Gillett, AR, Inc. upon leaving government servic
10/93	Carmar Lowe, Inc.	My wife will continue as a director of Carmar Lowe, Inc.

GPO 1998 46-260 (mac)

Use additional sheets if more space is required.

98 MAY 15 AM 11:06

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1997

FORM A
For use by Members, officers, and employees

Brian Phillip Bilbray
(Full Name)

1530 Longworth HOB
(Mailing Address)

Washington, DC 20515

Daytime Telephone: 202-225-2040

MC (Office Use Only) (5)

Filer Status: [X] Member of the U.S. House of Representatives — State: CA District 49 — [ ] Officer or Employee — Employing Office

Report Type: [X] Annual (May 15) — [ ] Amendment — [ ] Termination — Termination Date

A *$200 penalty* shall be assessed against anyone who files more than 30 days late.

PRELIMINARY INFORMATION — ANSWER EACH OF THESE QUESTIONS

I. Did you or your spouse have "earned" income (e.g., salaries or fees) of $200 or more from any source in the reporting period? **If yes, complete and attach Schedule I.** Yes [X] No [ ]

II. Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? **If yes, complete and attach Schedule II.** Yes [ ] No [X]

III. Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? **If yes, complete and attach Schedule III.** Yes [X] No [ ]

IV. Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset worth more than $1,000 in the reporting period? **If yes, complete and attach Schedule IV.** Yes [X] No [ ]

V. Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? **If yes, complete and attach Schedule V** Yes [ ] No [X]

VI. Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (e.g., aggregating more than $250 and not otherwise exempt)? **If yes, complete and attach Schedule VI** Yes [ ] No [X]

VII. Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $250 from one source)? **If yes, complete and attach Schedule VII** Yes [X] No [ ]

VIII. Did you hold any reportable positions on or before the date of filing in the current calendar year? **If yes, complete and attach Schedule VIII** Yes [ ] No [X]

IX. Did you have any reportable agreement or arrangement with an outside entity? **If yes, complete and attach Schedule IX** Yes [ ] No [X]

Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION — ANSWER EACH OF THESE QUESTIONS

TRUSTS—Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child? Yes [ ] No [X]

EXEMPTION—Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption? Yes [ ] No [X]

CERTIFICATION — THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended. The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct or its designee. Any individual who knowingly and willfully falsifies or who knowingly and willfully fails to file this report may be subject to civil penalties and criminal sanctions (See 5 U.S.C. app. 4 §104 and 18 U.S.C. §1001).

SIGNATURE OF REPORTING INDIVIDUAL: Brian P. Bilbray

DATE (Month/Day/Year): 5-15-98

SCHEDULE I — EARNED INCOME

List the source, type, and amount of earned income from any source (other than the filer's current employment by the U S Government) totalling $200 or more during the preceding calendar year. For a spouse, list the source and amount of any honoraria, list only the source for other spouse earned income exceeding $1,000

	Source	Type	Amount
Examples	Keene State	Approved Teaching Fee	$6,000
	State of Maryland	Legislative Pension	$9,000
	Civil War Roundtable (Oct 2nd)	Spouse Speech	$1,000
	Ontario County Board of Education	Spouse Salary	NA
	Bilbray Tax Service	Spouse self-empl	n/a

For payments to charity in lieu of honoraria, use Schedule II.

SCHEDULE III — ASSETS AND "UNEARNED" INCOME

BLOCK A — Asset and/or Income Source

Identify (a) each asset held for investment or production of income with a fair market value exceeding $1,000 at the end of the reporting year, and (b) any other asset or source of income which generated more than $200 in "unearned" income during the year. For rental property or land, provide an address. Provide full names of any mutual funds. For an IRA or retirement plan that is *self-directed*, list the underlying assets worth more than $1,000. For an IRA or retirement plan that is not self-directed, name the institution holding the account.

Exclude: Your personal residence(s) (unless there is rental income), any debt owed to you by your spouse, or by your or your spouse's child, parent, or sibling, any deposits totalling $5,000 or less in personal savings accounts, any financial interests in or income derived from U.S. Government retirement programs.

If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC) or is jointly held (JT), in the optional column on the far left.

BLOCK B — Value of Asset

at close of reporting year. If you use a valuation method other than fair market value, please specify the method used. If an asset was sold and is included only because it generated income, the value should be "None."

BLOCK C — Type of Income

BLOCK D — Amount of Income

For IRA's and retirement plans that are *not* self-directed, you may write in "NA" for income.

BLOCK E — Transaction

Indicate if asset was purchased (P), sold (S), or exchanged (E) in reporting year.

	Asset and/or Income Source	Value of Asset: A None	B $1 – $1,000	C $1,001 – $15,000	D $15,001 – $50,000	E $50,001 – $100,000	F $100,001 – $250,000	G $250,001 – $500,000	H $500,001 – $1,000,000	I $1,000,001 – $5,000,000	J $5,000,001 – $25,000,000	K $25,000,001 – $50,000,000	L Over $50,000,000	Type of Income: DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Type of Income (Specify. For Example: Partnership Income or Farm Income)	Amount of Income: I None	II $1 – $200	III $201 – $1,000	IV $1,001 – $2,500	V $2,501 – $5,000	VI $5,001 – $15,000	VII $15,001 – $50,000	VIII $50,001 – $100,000	IX $100,001 – $1,000,000	X $1,000,001 – $5,000,000	XI Over $5,000,000	Transaction
SP																															
DC	*Examples*					X							X							Royalties											P
JT			Indefinite				X								X																
SP	Mega Corp Stock																														
DC	Simon & Schuster																														
JT	1st Bank of Paducah KY accounts																														
JT	USAA Money Acct			X									X																		
JT	San Diego County Credit Union Acct			X											X																
JT	Hexcel			X									X																		
JT	Genrad			X									X																		

For additional assets and unearned income, use next page.

SCHEDULE IV — TRANSACTIONS

Name Brian Phillip Bilbray | Page 4 of 5

Report any purchase, sale, or exchange by you, your spouse, or dependent child during the reporting year of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child, or the purchase or sale of your personal residence, unless it is rented out.

SP, DC, JT	Asset	Type of Transaction: PURCHASE	SALE	EXCHANGE	Date (MO/DAY/YR)	Amount of Transaction: B ($1,001–$15,000)	C ($15,001–$50,000)	D ($50,001–$100,000)	E ($100,001–$250,000)	F ($250,001–$500,000)	G ($500,001–$1,000,000)	H ($1,000,001–$5,000,000)	I ($5,000,001–$25,000,000)	J ($25,000,001–$50,000,000)	K (Over $50,000,000)
SP	*Example* Mega Corporation Common Stock	X			10-12-97		X								
JT	House (DC)	X							X						

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SCHEDULE VII —TRAVEL PAYMENTS AND REIMBURSEMENTS

Identify the source and list travel itinerary, dates, and nature of expenses provided for travel and travel-related expenses totalling more than $250 received by you, your spouse, or a dependent child during the reporting period. Indicate whether a family member accompanied the traveler at the sponsor's expense, and the amount of time, if any, that was not at the sponsor's expense. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor.

Exclude: Travel-related expenses provided by federal, state, and local governments, or by a foreign government required to be separately reported under the Foreign Gifts and Decorations Act (5 U.S.C. § 7342); travel paid for by a Federal political committee; travel provided to a spouse or dependent child that is totally independent of his or her relationship to you.

Source	Date(s)	Point of Departure—Destination—Point of Return	Lodging? (Y/N)	Food? (Y/N)	Was a Family Member Included? (Y/N)	Any time not at sponsor's expense
Examples						
Chicago Chamber of Commerce	Mar. 2	Wash., D.C.—Chicago—Wash., D.C.	N	N	N	N
Roycroft Corporation	Aug. 6-13	Wash., D.C.—Los Angeles—Cleveland	Y	Y	Y	4 Days
Hershey Bipartisan Retreat Aspen Institute	Mar 7-9	Wash DC-Hershey PA- Wash DC	Y	Y	Y	N

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BRIAN P. BILBRAY
49TH DISTRICT, CALIFORNIA

COMMERCE COMMITTEE

SUBCOMMITTEE ON
HEALTH AND ENVIRONMENT

SUBCOMMITTEE ON
FINANCE AND HAZARDOUS
MATERIALS

SUBCOMMITTEE ON
OVERSIGHT AND
INVESTIGATIONS

HAND DELIVERED

Congress of the United States
House of Representatives
Washington, DC 20515

WASHINGTON OFFICE
1530 LONGWORTH HOUSE OFFICE BLDG
WASHINGTON, DC 20515
(202) 225-2040
FAX (202) 225-2948

DISTRICT OFFICE
1011 CAMINO DEL RIO SOUTH
SUITE 330
SAN DIEGO, CA 92108
(619) 291-1430
FAX (619) 291-8956

INTERNET
E-mail
brian.bilbray@mail.house.gov

World Wide Web
http://www.house.gov/bilbray/

June 5, 1998

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MC

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Ms. Robin H. Carle
The Clerk, U.S. House of Representatives
Legislative Resource Center
1036 Longworth House Office Building
Washington, DC 20515-6612

Dear Ms. Carle:

Please accept this Amendment of my 1997 Financial Disclosure statement. During examination of my 1997 Disclosure, I found that I inadvertently failed to fill out Block D of Schedule III.

Thank you for your attention to this matter and if you have questions, please call Suzanne Michel in my office.

Sincerely,

Brian P. Bilbray

Brian P. Bilbray
Member of Congress

BPB:sm

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Name Brian Phillip Bilbray | Page 3 of 5

SCHEDULE III — ASSETS AND "UNEARNED" INCOME

BLOCK A — Asset and/or Income Source

Identify (a) each asset held for investment or production of income with a fair market value exceeding $1,000 at the end of the reporting year, and (b) any other asset or source of income which generated more than $200 in "unearned" income during the year. For rental property or land, provide an address. Provide full names of any mutual funds. For an IRA or retirement plan that is *self directed*, list the underlying assets worth more than $1,000. For an IRA or retirement plan that is not selfdirected, name the institution holding the account.

Exclude: Your personal residence(s) (unless there is rental income), any debt owed to you by your spouse, or by your or your spouse's child, parent, or sibling, any deposits totalling $5,000 or less in personal savings accounts, any financial interests in or income derived from U.S. Government retirement programs.

If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC) or is jointly held (JT), in the optional column on the far left.

SP		SP	Mega Corp. Stock
DC	*Examples*		Simon & Schuster
JT			1st Bank of Paducah, KY accounts

BLOCK B — Value of Asset

at close of reporting year. If you use a valuation method other than fair market value, please specify the method used. If an asset was sold and is included only because it generated income, the value should be "None."

	A None	B $1 – $1,000	C $1,001 – $15,000	D $15,001 – $50,000	E $50,001 – $100,000	F $100,001 – $250,000	G $250,001 – $500,000	H $500,001 – $1,000,000	I $1,000,001 – $5,000,000	J $5,000,001 – $25,000,000	K $25,000,001 – $50,000,000	L Over $50,000,000
Examples			Indefinite		X							
			X			X						

BLOCK C — Type of Income

	DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Type of Income (Specify. For Example: Partnership Income or Farm Income)
Examples	X						Royalties
			X				

BLOCK D — Amount of Income

For IRA's and retirement plans that are *not* self-directed, you may write in "NA" for income.

	I None	II $1 – $200	III $201 – $1,000	IV $1,001 – $2,500	V $2,501 – $5,000	VI $5,001 – $15,000	VII $15,001 – $50,000	VIII $50,001 – $100,000	IX $100,001 – $1,000,000	X $1,000,001 – $5,000,000	XI Over $5,000,000
Examples				X							
						X			X		

BLOCK E — Transaction

Indicate if asset was purchased (P), sold (S), or exchanged (E) in reporting year.

		A	B	C	D	E	F	G	H	I	J	K	L	I	II	III	IV	V	VI	VII	VIII	IX	X	XI	
Examples						X							X				X								P
							X												X			X			
JT	USAA Money Acct			X									X			X								-	
JT	San Diego County Credit Union Acct			X										X											
JT	Hexcel			X									X		X										
JT	Genrad			X									X	X											

For additional assets and unearned income, use next page.

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(Office Use Only)

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1997

Form A
For use by Members, officers, and employees

Michael Bilirakis, M C
(Full Name)

2369 Rayburn HOB
(Mailing Address)

Washington DC 20515

Daytime Telephone
202-225-5755

Filer Status
[X] Member of the U S House of Representatives — State FL, District 09
[ ] Officer or Employee — Employing Office

Report Type
[X] Annual (May 15)
[ ] Amendment
[ ] Termination — Termination Date

A $200 penalty shall be assessed against anyone who files more than 30 days late.

PRELIMINARY INFORMATION -- ANSWER EACH OF THESE QUESTIONS

I Did you or your spouse have "earned" income (e g salaries or fees) of $200 or more from any source in the reporting period?
If yes, complete and attach Schedule I. Yes [X] No [ ]

II Did any individual or organization make a donation to charity in lieu of paying you for a speech, apppearance or article in the reporting period?
If yes, complete and attach Schedule II. Yes [ ] No [X]

III Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period?
If yes, complete and attach Schedule III. Yes [X] No [ ]

IV Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset worth more than $1,000 in the reporting period?
If yes, complete and attach Schedule IV. Yes [X] No [ ]

V Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period?
If yes, complete and attach Schedule V. Yes [X] No [ ]

VI Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i e aggregating more than $250 and not otherwise exempt)?
If yes, complete and attach Schedule VI. Yes [ ] No [X]

VII Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $250 from one source)?
If yes, complete and attach Schedule VII. Yes [X] No [ ]

VIII Did you hold any reportable positions on or before the date of filing in the current calendar year?
If yes, complete and attach Schedule VIII. Yes [X] No [ ]

IX Did you have any reportable agreement or arrangement with an outside entity?
If yes, complete and attach Schedule IX. Yes [ ] No [X]

Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION -- ANSWER EACH OF THESE QUESTIONS

TRUSTS--Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed Have you excluded from this report details of such a trust benefiting you, your spouse or dependent child? (See instructions, pages 10-11) Yes [ ] No [X]

EXEMPTION Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption? (See Instructions, page 11) Yes [ ] No [X]

CERTIFICATION -- THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct or its designee Any individual who knowingly and willfully falsifies or who knowingly and willfully fails to file this report may be subject to civil penalties and criminal sanctions (See 5 U S C app 4, 104 and 18 U S C 1001)

SIGNATURE OF REPORTING INDIVIDUAL Michael Bilirakis

DATE (Month/Day/Year) May 15, 1998

316

SCHEDULE I -- EARNED INCOME

List the source, type, and amount of earned income from any source (other than the filer's current employment by the U S Government) totalling $200 or more during the preceding calendar year. For a spouse, list the source and amount of any honoraria; list only the source for other spouse earned income exceeding $1,000. For further information, see Instructions, pages 12-13

	Source	Type	Amount
Examples	Keene State	Approved Teaching Fee	$10,000
	State of Maryland	Legislative Pension	$9,000
	Civil War Roundtable (Oct 2nd)	Spouse Speech	$1,000
	Ontario County Board of Education	Spouse Salary	NA
	Estate of McKinley	Personal Representative	$1,379 75

For payments to charity in lieu of honoraria, use Schedule II.

SCHEDULE III -- ASSETS AND "UNEARNED" INCOME

BLOCK A **Asset and/or Income Source** Identify (a) each asset held for investment or production of income with a fair market value exceeding $1,000 at the end of the reporting year, and (b) any other asset or source of income which generated more than $200 in "unearned" income during the year. For rental property or land, provide an address. Provide full names of any mutual funds. For an IRA or retirement plan that is *self-directed*, list the underlying assets worth more than $1,000. For an IRA or retirement plan that is *not* self-directed, name the institution holding the account. **Exclude:** Your personal residence(s) (unless there is rental income), any debt owed to you by your spouse, or by your or your spouse's child, parent, or sibling, any deposits totalling $5,000 or less in personal savings accounts, any financial interests in or income derived from U.S. Government retirement programs. If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC) or is jointly held (JT), in the optional column on the far left. For further information, see instructions, pages 14-20			BLOCK B **Value of Asset** at close of reporting year. If you use a valuation method other than fair market value, please specify the method used. If an asset was sold and is included only because it generated income, the value should be "None."	BLOCK C **Type of Income** If other than one of the listed categories, specify the type of income by writing a brief description in this block.	BLOCK D **Amount of Income** For IRA's and retirement plans that are *not* self-directed, you may write in "NA" for income	BLOCK E **Transaction** Indicate if asset was purchased(P), sold(S), or exchanged(E) in reporting year.
SP, DC, *Examples:* JT		Mega Corp. Stock SP 123 Main St., Dover, Del 1st Bank of Paducah, KY accounts	$15,001 - $50,000 $250,001 - $500,000 $50,001 - $100,000	Dividends Rent Interest	$201 - $1,000 $1,001 - $2,500 $5,001 - $15,000	P
JT		Office Bldg-4538 Bartelt Rd., Holiday, FL	$50,001 - $100,000	Rent	$1,001 - $2,500	
JT		Bellhaven Apts., Dunedin, FL (1/2)	$1,001 - $15,000	No operational interest	None	
JT		Rental Condo-Gateway Towers, Pittsburgh, PA	$15,001 - $50,000	Rent	$2,501 - $5,000	
SP		Bldg. (1/2) Athens & Pinellas, Tarpon Springs, FL	$15,001 - $50,000	Rent	None	
SP		1/2 of 2 lots (unimproved), Hope Subdiv., Tarpon Springs, FL	$1,001 - $15,000	None - Net loss	None	

SCHEDULE III -- ASSETS AND "UNEARNED" INCOME

JT	House-306 Driftwood Dr., Palm Harbor, FL	$100,001 - $250,000	None - Net loss	None	
JT	Nations Bank of FL (CDs & Savings)	$15,001 - $50,000	Interest	$1,001 - $2,500	
JT	Barnett Bank (MM & Checking)	$15,001 - $50,000	Interest	$201 - $1,000	
JT	SunTrust Bank (CD, Savings, Stock)	$50,001 - $100,000	Interest, Dividends	$1,001 - $2,500	
JT	Cong Fed Credit Union (CDs, Checking, Savings)	$15,001 - $50,000	Interest	$1,001 - $2,500	
JT	A G. Edwards Cash Fund	$1,001 - $15,000	Interest	$1 - $200	
	Holiday Fish & Chips Corp	$100,001 - $250,000	None	None	S
SP	Fortis Securities	$1,001 - $15,000	Dividends	$201 - $1,000	
SP	Caesars World Stock (100sh)	$1,001 - $15,000	None	None	S
SP	Wash. State Power Supply Bond	$1,001 - $15,000	Interest	$201 - $1,000	Sold - called
SP	First Nat Bank of Pasco - Stock	$1,001 - $15,000	None	None	
JT	First Union Corp - Stock	$15,001 - $50,000	Dividends	$201 - $1,000	P
SP	First Union Corp - Stock - IRA	$15,001 - $50,000	Dividends	$201 - $1,000	
SP	A G Edwards-Daily Cash Accumulation Fund - IRA	$1,001 - $15,000	Interest	$1 - $200	
SP	Putnam High Income Govt TR IRA	$1,001 - $15,000	Dividends	$201 - $1,000	
SP	Life of Georgia - IRA	$1,001 - $15,000	Interest	$201 - $1,000	
	A G Edwards-Daily Cash Accumulation Fund - IRA	$1,001 - $15,000	Interest	$201 - $1,000	
	First Union Corp Stock - IRA	$50,001 - $100,000	Dividends	$1,001 - $2,500	
	Putnam High Income Govt TR - IRA	$50,001 - $100,000	Dividends	$2,501 - $5,000	

SCHEDULE III -- ASSETS AND "UNEARNED" INCOME

	A.G. Edwards - Stock - IRA	$15,001 - $50,000	Dividends	$201 - $1,000	
	IBM - Stock - IRA	$100,001 - $250,000	Dividends	$201 - $1,000	
JT	Karanikoles Mortgage, 529 Grand Ave., Tarpon Springs, FL	$1,001 - $15,000	Interest	$201 - $1,000	Paid off
	Innovet, Inc. - Stock - IRA	None	None	None	
SP	IBM - Stock - IRA	$15,001 - $50,000	Dividends	$201 - $1,000	
JT	Kemper Municipal Bond Fund	$1,001 - $15,000	Interest	$201 - $1,000	
JT	Tech Data Stock	$1,001 - $15,000	Dividends	None	
	Checkers - Stock - IRA	$1 - $1,000	None	None	
	Adelphia - Stock - IRA	$1,001 - $15,000	None	None	
SP	Adelphia - Stock - IRA	$1,001 - $15,000	None	None	
SP	Checkers - Stock - IRA	$1 - $1,000	None	None	
JT	Morrison-Knudson Warrants	$1 - $1,000	None	None	
JT	Checkers Stock	$1 - $1,000	None	None	
	Tech Data - Stock - IRA	$1,001 - $15,000	None	None	
	Morrison-Knudson Warrants - IRA	$1 - $1,000	None	None	
	Tarpon Foods (sold 12-1-88)	$1 - $1,000	Bad Debt Recovery	$5,001 - $15,000	
JT	Audiovox Stock	$1,001 - $15,000	None	None	
	Audiovox Stock - IRA	$1,001 - $15,000	None	None	
JT	Suburban Propane - Stock	$1,001 - $15,000	Dividends	$1,001 - $2,500	

SCHEDULE III -- ASSETS AND "UNEARNED" INCOME

	Peoples Bank - Stock	$1,001 - $15,000	None	None	P
	Great Subs, Inc. - Mortgage Note	$100,001 - $250,000	Interest, Capital Gains	$5,001 - $15,000	
JT	Oppenheimer MSIG - Class B Fund	$1,001 - $15,000	Dividends	$1 - $200	P
JT	Peoples Bank (Savings, CDs)	$15,001 - $50,000	Interest	$201 - $1,000	

SCHEDULE IV -- TRANSACTIONS

Report any purchase, sale, or exchange by you, your spouse, or dependent child during the reporting year of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child, or the purchase or sale of your personal residence, unless it is rented out. For further information, see Instructions, pages 20-21.

SP,DC,JT	Asset	Type of Transaction	Date	Amount of Transaction
	Example Mega Corporation Common Stock	Purchase	10/12/94	$15,001 - $50,000
JT	First Union Stock	Purchase	7-20-97	$1,001 - $15,000
	Holiday Fish & Chips Corp	Sold	7/97	$100,001 - $250,000
SP	Caesars World	Sold/Redeemed	12/97	$1,001 - $15,000 (Rec'd 1/98)
JT	Oppenheimer MSIG, Class B Fund	Purchase	7-25-97	$1,001 - $15,000
SP	Washington State Power Bond	Sold/Called	5-6-97	$1,001 - $15,000
	Peoples Bank Stock	Purchase	2-24-97	$ 0 - $1,000

SCHEDULE V -- LIABILITIES

Report liabilities of over $10,000 owed to any one creditor ***at any time*** during the reporting period by you, your spouse, or dependent child. Mark the highest amount owed during the year.
Exclude: Any mortgage on your personal residence (unless it is rented out); loans secured by automobiles, household furniture, or appliances, and liabilities owed to a spouse, or the child, parent, or sibling of you or your spouse. Report ***revolving charge accounts*** only if the balance at the end of the reporting period exceeded $10,000. For further information, see Instructions, pages 21-22.

SP,DC,JT	Creditor	Type of Liability	Amount of Liability
	Example First Bank of Wilmington, Delaware	Mortgage on 123 Main St., Dover, Del.	$100,001 - $250,000
JT	Barnett Bank, Holiday FL	Mortgage on 4538 Bartelt Rd., Holiday, FL (Law office)	$50,001 - $100,000
JT	Cong. Fed. Credit Union	Acquired loan for son (secured by CD)	$15,001 - $50,000
	Northwestern Mutual	Cash value loan on life insurance (4/23/96)	$15,001 - $50,000
	Southeast Financial	Personal loan (3/15/96)	$15,001 - $50,000

SCHEDULE VII -- TRAVEL PAYMENTS AND REIMBURSEMENTS

Identify the source and list travel itinerary, dates, and nature of expenses provided for travel and travel-related expenses totalling more than $250 received by you, your spouse, or a dependent child during the reporting period. Indicate whether a family member accompanied the traveler at the sponsor's expense, and the amount of time, if any, that was not at the sponsor's expense. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor.
Exclude: Travel-related expenses provided by federal, state and local governments, or by a foreign government required to be separately reported under the Foreign Gifts and Decorations Act (5 U.S.C. 7342), travel paid for by a Federal political committee, travel provided to a spouse or dependent child that is totally independent of his or her relationship to you. For further information, see Instructions, pages 24-26.

Source	Date(s)	Point of Departure--Destination--Point of Return	Lodging? (Y/N)	Food? (Y/N)	Was a Family Member Included? (Y/N)	Any time not at sponsor's expense
Examples Chicago Chamber of Commerce	Mar 2	Wash., D.C.-Chicago-Wash., D.C.	N	N	N	N
Mega Corporation	Aug 6-13	Wash., D.C.-Los Angeles-Cleveland	Y	Y	Y	4 Days
American Hellenic Institute, Inc	Aug. 17-30, 1997	Tampa-NYC-Athens-NYC-Tampa	Y	Y	Y	7 days

SCHEDULE VIII -- POSITIONS

Report all positions, compensated or uncompensated, held during the current calendar year as an officer, director, trustee of an organization, partner, proprietor, representative, employee, or consultant of any corporation, firm, partnership, or other business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States. For further information, see Instructions, page 26

Exclude: Positions held in any religious, social, fraternal, or political entities, positions solely of an honorary nature, and positions listed on Schedule I

Position	Organization
President/Director	Holiday Fish & Chips Corp.

MICHAEL BILIRAKIS
9TH DISTRICT, FLORIDA

COMMITTEE ON COMMERCE
CHAIRMAN, HEALTH AND ENVIRONMENT SUBCOMMITTEE
MEMBER, ENERGY AND POWER SUBCOMMITTEE

COMMITTEE ON VETERANS' AFFAIRS
VICE CHAIRMAN, HEALTH SUBCOMMITTEE

WORLDWIDE WEB PAGE
www.house.gov/bilirakis welcome.html

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(202) 225-5755

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CLEARWATER, FL 33755
(813) 441-3721

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SUITE 308
LAND O'LAKES, FL 34639
(813) 996-7441

Congress of the United States

House of Representatives

Washington, DC 20515-0909

May 15, 1998

(1)

MC

98 MAY 15 PM 3:57

Honorable Robin Carle
Clerk of the House of Representatives
H-154, The Capitol
Washington, DC 20515

Dear Ms. Carle:

Enclosed please find my Financial Disclosure Statement for 1997. In preparation of this current report I discovered an omission made on my Financial Disclosure Statement for 1996. In an inadvertent oversight I omitted listing the sale/redemption of an asset under Schedules III and IV of my 1996 report. This asset is an Armstrong County Bond and should have been disclosed as follows:

1996 Schedule III - Assets

Asset	*Value of Asset*	*Type of Income*	*Amount of Income*	*Transaction*
Armstrong Co. Bond	None - $1,000	Interest	$201 - $1,000	Sale/Called

1996 Schedule IV - Transactions

Asset	*Type of Transaction*	*Date*	*Amount of Transaction*
Armstrong Co. Bond	Sold/Called	4/96	$1,001 - $15,000

I regret this oversight and my inability to submit this amendment during the appropriate amendment period (close-of-year). However, upon immediate discovery and in good faith I submit this letter as a justified amendment to my 1996 Financial Disclosure Statement.

Thank you.

Sincerely yours,

Michael Bilirakis

Michael Bilirakis
Member of Congress

MB:jt
Enclosure

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UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1997

Form A
For use by Members, officers, and employees

Sanford D. Bishop, Jr.
(Full Name)

1433 Longworth House Office Building
(Mailing Address)

Washington DC 20515

Daytime Telephone: (202) 225-3631

Filer Status

[X] Member of the U.S. House of Representatives — State: GA, District: 02

[ ] Officer or Employee — Employing Office:

Report Type

[X] Annual (May 15)

[ ] Amendment

[ ] Termination — Termination Date:

A $200 penalty shall be assessed against anyone who files more than 30 days late.

PRELIMINARY INFORMATION -- ANSWER EACH OF THESE QUESTIONS

I. Did you or your spouse have "earned" income (e.g., salaries or fees) of $200 or more from any source in the reporting period? **If yes, complete and attach Schedule I.**	Yes [ ]	No [X]	VI. Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $250 and not otherwise exempt)? **If yes, complete and attach Schedule VI.**	Yes [ ]	No [X]
II. Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? **If yes, complete and attach Schedule II.**	Yes [ ]	No [X]	VII. Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $250 from one source)? **If yes, complete and attach Schedule VII.**	Yes [X]	No [ ]
III. Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? **If yes, complete and attach Schedule III.**	Yes [X]	No [ ]	VIII. Did you hold any reportable positions on or before the date of filing in the current calendar year? **If yes, complete and attach Schedule VIII.**	Yes [X]	No [ ]
IV. Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset worth more than $1,000 in the reporting period? **If yes, complete and attach Schedule IV.**	Yes [ ]	No [X]	IX. Did you have any reportable agreement or arrangement with an outside entity? **If yes, complete and attach Schedule IX.**	Yes [ ]	No [X]
V. Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? **If yes, complete and attach Schedule V.**	Yes [X]	No [ ]	**Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.**		

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION -- ANSWER EACH OF THESE QUESTIONS

TRUSTS - Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child? (See Instructions, pages 10-11.)	Yes [ ]	No [X]
EXEMPTION Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption? (See Instructions, page 11.)	Yes [ ]	No [X]

CERTIFICATION -- THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended. The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct or its designee. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil penalties and criminal sanctions (See 5 U.S.C. app. 4, 104 and 18 U.S.C 1001)

SIGNATURE OF REPORTING INDIVIDUAL Sanford D. Bishop, Jr.

DATE (Month/Day/Year) 5/12/98

SCHEDULE III -- ASSETS AND "UNEARNED" INCOME

	BLOCK A **Asset and/or Income Source** Identify (a) each asset held for investment or production of income with a fair market value exceeding $1,000 at the end of the reporting year, and (b) any other asset or source of income which generated more than $200 in "unearned" income during the year. For rental property or land, provide an address. Provide full names of any mutual funds. For an IRA or retirement plan that is *self-directed*, list the underlying assets worth more than $1,000. For an IRA or retirement plan that is *not* self-directed, name the institution holding the account. **Exclude:** Your personal residence(s) (unless there is rental income); any debt owed to you by your spouse, or by your or your spouse's child, parent, or sibling; any deposits totalling $5,000 or less in personal savings accounts; any financial interests in or income derived from U.S. Government retirement programs. If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC) or is jointly held (JT), in the optional column on the far left. For further information, see instructions, pages 14-20	BLOCK B **Value of Asset** at close of reporting year. If you use a valuation method other than fair market value, please specify the method used. If an asset was sold and is included only because it generated income, the value should be "None."	BLOCK C **Type of Income** If other than one of the listed categories, specify the type of income by writing a brief description in this block.	BLOCK D **Amount of Income** For IRA's and retirement plans that are *not* self-directed, you may write in "NA" for income.	BLOCK E **Transaction** Indicate if asset was purchased(P), sold(S), or exchanged(E) in reporting year.
SP DC, *Examples:* JT	SP Mega Corp. Stock SP 123 Main St., Dover, Del. 1st Bank of Paducah, KY accounts	$15,001 - $50,000 $250,001 - $500,000 $50,001 - $100,000	Dividends Rent Interest	$201 - $1,000 $1,001 - $2,500 $5,001 - $15,000	P
	House and Lot 4129 Roman Dr. Columbus, GA	$50,001 - $100,000	Rent	$5,001 - $15,000	
	Legislative Retirement System 2 Northside, Atlanta GA	$1,001 - $15,000	Legislative Pension	None	
JT	House and Lot 311 Yeates St Starkville, MS	$15,001 - $50,000	Rent	$1 - $200	
JT	**Commonwealth Bank Mobile, AL	$1,001 - $15,000	Interest	None	
JT	**Merrill Lynch CMA Money Acct	$15,001 - $50,000	Dividends	None	
JT	**Prudential Securities	$50,001 - $100,000	Dividends	None	

SCHEDULE III -- ASSETS AND "UNEARNED" INCOME

JT	**Bank of New York Unit Investment Trust	$1,001 - $15,000	Interest	None	
	AmSouth Bank, NA Mobile, AL	$1,001 - $15,000	Interest	$1 - $200	
	1st Union Bank of DC	$1,001 - $15,000	Interest	$1 - $200	
	South Trust Bank of Cols., NA Columbus, GA	$1 - $1,000	Interest	$1 - $200	
	Signet Bank, Washington DC	$1,001 - $15,000	Interest	$1 - $200	
	Lot 24A Lakemont Heights Hartwell, GA	$1,001 - $15,000	None	None	
	Congressional Federal Credit Union	$1 - $1,000	Interest	$1 - $200	
JT	**Commonwealth Bank Mobile, AL	$1 - $1,000	Dividends	None	
	** All Income Paid to Joint Tenant	None	Not applicable	None	

SCHEDULE V -- LIABILITIES

Report liabilities of over $10,000 owed to any one creditor ***at any time*** during the reporting period by you, your spouse, or dependent child. Mark the highest amount owed during the year.
Exclude: Any mortgage on your personal residence (unless it is rented out); loans secured by automobiles, household furniture, or appliances; and liabilities owed to a spouse, or the child, parent, or sibling of you or your spouse. Report ***revolving charge accounts*** only if the balance at the end of the reporting period exceeded $10,000. For further information, see instructions, pages 21-22.

SP,DC,JT	Creditor	Type of Liability	Amount of Liability
	Example: First Bank of Wilmington, Delaware	Mortgage on 123 Main St., Dover, Del.	$100,001 - $250,000
	Congressional Federal Credit Union	Revolving Charge Account	$10,001 - $15,000
	Homeside Lending Incorporated Jacksonville, FL	Home Mortgage	$50,001 - $100,000

SCHEDULE VII -- TRAVEL PAYMENTS AND REIMBURSEMENTS

Identify the source and list travel itinerary, dates, and nature of expenses provided for travel and travel-related expenses totalling more than $250 received by you, your spouse, or a dependent child during the reporting period. Indicate whether a family member accompanied the traveler at the sponsor's expense, and the amount of time, if any, that was not at the sponsor's expense. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor.
Exclude: Travel-related expenses provided by federal, state and local governments, or by a foreign government required to be separately reported under the Foreign Gifts and Decorations Act (5 U S C 7342), travel paid for by a Federal political committee, travel provided to a spouse or dependent child that is totally independent of his or her relationship to you. For further information, see Instructions, pages 24-26

Source	Date(s)	Point of Departure--Destination--Point of Return	Lodging? (Y/N)	Food? (Y/N)	Was a Family Member Included? (Y/N)	Any time not at sponsor's expense
Examples Chicago Chamber of Commerce Mega Corporation	Mar 2 Aug 8-13	Wash., D C -Chicago-Wash., D C Wash., D C -Los Angeles-Cleveland	N Y	N Y	N Y	N 4 Days
The Tobacco Institute	2/13/97-2/16/97	Wash. DC to Scottsdale, AZ to Wash DC	Y	Y	N	None
The American Legion	9/2/97-9/3/97	Albany, GA to Orlando, FL to Wash. DC	Y	N	N	None
Georgia Farm Bureau Federation	12/7/97	Paid for own travel	Y	Y	N	None
The Convenience Store People	11/2/97-11/3/97	Albany, GA to Atlanta, GA	Y	N	N	None

SCHEDULE VIII -- POSITIONS

Report all positions, compensated or uncompensated, held during the current calendar year as an officer, director, trustee of an organization, partner, proprietor, representative, employee, or consultant of any corporation, firm, partnership, or other business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States. For further information, see Instructions, page 26.

Exclude: Positions held in any religious, social, fraternal, or political entities; positions solely of an honorary nature; and positions listed on Schedule I.

Position	Organization
Board Member	Tubman African American Museum, 340 Walnut St. Macon, GA
Board Member	William H. Spencer Golden Owlettes, Columbus, GA
Board Member	Liberty Theatre Cultural Center, Inc. 823 8th Av, Columbus, GA
Board Member	A.J. McClung YMCA , 1175 MLK Jr. Blvd., Columbus, GA

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UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1997

FORM A
For use by Members, officers, and employees

Rod R BLAGOJEVICH (Full Name)
2710 W. LOGAN BLVD (Mailing Address)
CHICAGO IL 60647
773-276-8984 Daytime Telephone

Filer Status	[X] Member of the U.S. House of Representatives	State ILLINOIS District 5TH	[ ] Officer or Employee	Employing Office	
Report Type	[X] Annual (May 15)	[ ] Amendment		[ ] Termination	Termination Date

A *$200 penalty* shall be assessed against anyone who files more than 30 days late.

PRELIMINARY INFORMATION — ANSWER EACH OF THESE QUESTIONS

I	Did you or your spouse have "earned" income (e.g., salaries or fees) of $200 or more from any source in the reporting period? **If yes, complete and attach Schedule I.**	Yes [X]	No [ ]	VI Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $250 and not otherwise exempt)? **If yes, complete and attach Schedule VI.**	Yes [ ] No [X]
II	Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? **If yes, complete and attach Schedule II.**	Yes [ ]	No [X]	VII Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $250 from one source)? **If yes, complete and attach Schedule VII.**	Yes [ ] No [X]
III	Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? **If yes, complete and attach Schedule III.**	Yes [X]	No [ ]	VIII Did you hold any reportable positions on or before the date of filing in the current calendar year? **If yes, complete and attach Schedule VIII.**	Yes [ ] No [X]
IV	Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset worth more than $1,000 in the reporting period? **If yes, complete and attach Schedule IV.**	Yes [X]	No [ ]	IX Did you have any reportable agreement or arrangement with an outside entity? **If yes, complete and attach Schedule IX.**	Yes [X] No [ ]
V	Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? **If yes, complete and attach Schedule V.**	Yes [X]	No [ ]	**Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.**	

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION — ANSWER EACH OF THESE QUESTIONS

TRUSTS—Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child?	Yes [ ]	No [X]
EXEMPTION—Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption?	Yes [ ]	No [X]

CERTIFICATION — THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended. The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct or its designee. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil penalties and criminal sanctions (*See* 5 U.S.C. app. 4, §104 and 18 U.S.C. §1001).

SIGNATURE OF REPORTING INDIVIDUAL: Rod Blagojevich

DATE (Month/Day/Year): 5/14/98

SCHEDULE I — EARNED INCOME

List the source, type, and amount of earned income from any source (other than the filer's current employment by the U.S. Government) totalling $200 or more during the preceding calendar year. For a spouse, list the source and amount of any honoraria; list only the source for other spouse earned income exceeding $1,000.

	Source	Type	Amount
Examples	Keene State	Approved Teaching Fee	$6,000
	State of Maryland	Legislative Pension	$9,000
	Civil War Roundtable (Oct. 2nd)	Spouse Speech	$1,000
	Ontario County Board of Education	Spouse Salary	NA
	Rod BLAGOJEVICH atty at Law Co counsel fees	Legal Income - CASES PROJECTED 1-7-97	GROSS $84,015 Net $80,774
	US Government	Legislative Salary	$121,724.38
	Kaplan Sorosky Atty At Law	Spouse Salary	N/A

For payments to charity in lieu of honoraria, use Schedule II.

Name ROD R BLAGOJEVICH Page 3 of 7

SCHEDULE III — ASSETS AND "UNEARNED" INCOME

BLOCK A — Asset and/or Income Source

Identify (a) each asset held for investment or production of income with a fair market value exceeding $1,000 at the end of the reporting year, and (b) any other asset or source of income which generated more than $200 in "unearned" income during the year. For rental property or land, provide an address. Provide full names of any mutual funds. For an IRA or retirement plan that is *self-directed*, list the underlying assets worth more than $1,000. For an IRA or retirement plan that is not selfdirected, name the institution holding the account.

Exclude: Your personal residence(s) (unless there is rental income); any debt owed to you by your spouse, or by your or your spouse's child, parent, or sibling; any deposits totalling $5,000 or less in personal savings accounts; any financial interests in or income derived from U.S. Government retirement programs.

If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC) or is jointly held (JT), in the optional column on the far left.

BLOCK B — Value of Asset

at close of reporting year.
If you use a valuation method other than fair market value, please specify the method used. If an asset was sold and is included only because it generated income, the value should be "None."

BLOCK C — Type of Income

BLOCK D — Amount of Income

For IRA's and retirement plans that are *not* self-directed, you may write in "NA" for income.

BLOCK E — Transaction

Indicate if asset was purchased (P), sold (S), or exchanged (E) in reporting year.

	BLOCK A	BLOCK B												BLOCK C							BLOCK D										BLOCK E
		A None	B $1 – $1,000	C $1,001 – $15,000	$15,001 – $50,000	E $50,001 – $100,000	F $100,001 – $250,000	G $250,001 – $500,000	H $500,001 – $1,000,000	I $1,000,001 – $5,000,000	J $5,000,001 – $25,000,000	K $25,000,001 – $50,000,000	L Over $50,000,000	DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Type of Income (Specify. For Example, Partnership Income or Farm Income)	I None	II $1 – $200	III $201 – $1,000	IV $1,001 – $2,500	V $2,501 – $5,000	VI $5,001 – $15,000	VII $15,001 – $50,000	VIII $50,001 – $100,000	IX $100,001 – $1,000,000	X $1,000,001 – $5,000,000	XI Over $5,000,000	P, S, E
SP, DC, JT	*Examples*	SP	Mega Corp. Stock											X							Royalties											P
			Simon & Schuster		Indefinite																											
			1st Bank of Paducah, KY accounts				X									X									X				X		
JT	FIRST NATL BANK OF CHS MONEY MKT			X												X							X								
SP	MERRILL LYNCH IRA			X												X							X								
SP	CD AMERICA LAWRENCE DR CONDOMINIUM LAT 66 S W						X								X									X							
SP	MELROSE CHS IL UNIT A1																														
JT	ILLINOIS COLLEGE SAVINGS BONDS GENERAL OBLIGATION 2018	X														X									X						S
	FIRST NATL BANK OF CHICAGO CERTIFICATE OF DEP.				X											X							X								
JT	JOHN HANCOCK - BOSTON SBIC OPPORTUNITIES FUND B			X										X		X								X							

For additional assets and unearned income, use next page.

SCHEDULE III — ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Name ROD R BLAGOJEVICH | Page 4 of 7

SP. DC. JT	BLOCK A Asset and/or Income Source	BLOCK B Year-End Value of Asset												BLOCK C Type of Income							BLOCK D Amount of Income										BLOCK E Transaction
		A None	B $1 – $1,000	C $1,001 – $15,000	D $15,001 – $50,000	E $50,001 – $100,000	F $100,001 – $250,000	G $250,001 – $500,000	H $500,001 – $1,000,000	I $1,000,001 – $5,000,000	J $5,000,001 – $25,000,000	K $25,000,001 – $50,000,000	L Over $50,000,000	DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Type of Income (Specify)	I None	II $1 – $200	III $201 – $1,000	IV $1,001 – $2,500	V $2,501 – $5,000	VI $5,001 – $15,000	VII $15,001 – $50,000	VIII $50,001 – $100,000	IX $100,001 – $1,000,000	X $1,000,001 – $5,000,000	XI Over $5,000,000	P, S, E
JT	John Hancock Boston MA Tax Exempt Income Fund B			X										X			X						X								
JT	Vanguard Municipal Bond Money Mkt Wally Fox PA			X										X								X									
	John Hancock SEP IRA				X									X		X	X					N/A IRA									
	Special Opportunities CLB				X									X		X	X					N/A IRA									
	Aim Constellation Fund SEP IRA				X									X		X	X					N/A Retirement Acct									
	General Assembly Retirement St of Illinois Retirmt	X												X		X	X						X							P, S	
JT	AMAZON Stock			X										X			X					X								P	
JT	INTEL Stock			X										X								X								P	
JT	Eastman Kodak Stock			X										X								X								P	
JT	CATAPILLER Stock			X										X								X								P	
JT	McDonalds Stock			X										X							X									P	

This page may be copied if more space is required.

SCHEDULE IV — TRANSACTIONS

Name Rod BLAGOJEVICH | Page 5 of 7

Report any purchase, sale, or exchange by you, your spouse, or dependent child during the reporting year of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child, or the purchase or sale of your personal residence, unless it is rented out.

SP, DC, JT	Asset	Type of Transaction: PURCHASE	SALE	EXCHANGE	Date (MO/DAY/YR)	Amount of Transaction: B $1,001–$15,000	C $15,001–$50,000	D $50,001–$100,000	E $100,001–$250,000	F $250,001–$500,000	G $500,001–$1,000,000	H $1,000,001–$5,000,000	I $5,000,001–$25,000,000	J $25,000,001–$50,000,000	K Over $50,000,000
SP	*Example:* Mega Corporation Common Stock	X			10-12-97		X								
JT	AMAZON Common Stock	X			9-18-97	X									
JT	AMAZON Common Stock		X		10-9-97	X									
JT	ILLINOIS College SAVINGS Bonds GENERAL OBLIGATION 2012 Coupon		X		7-23-97	X									
JT	INTEL Common Stock	X			8-19-97 9-17 & 11-3	X									
JT	EASTMAN KODAK Common Stock	X			7-24-97	X									
JT	CATAPILLAR Common Stock	X			7-24-97	X									
JT	McDonalds Common Stock	X			7-24-97	X									

This page may be copied if more space is required.

SCHEDULE V — LIABILITIES

Report liabilities of over $10,000 owed to any one creditor ***at any time*** during the reporting period by you, your spouse, or dependent child. Mark the highest amount owed during the year. **Exclude:** Any mortgage on your personal residence (unless it is rented out), loans secured by automobiles, household furniture, or appliances, and liabilities owed to a spouse, or the child, parent, or sibling of you or your spouse. Report ***revolving charge accounts*** only if the balance at the end of the reporting period exceeded $10,000.

SP, DC, JT	Creditor	Type of Liability	Amount of Liability										
			B $10,001– $15,000	C $15,001– $50,000	D $50,001– $100,000	E $100,001– $250,000	F $250,001– $500,000	G $500,001– $1,000,000	H $1,000,001– $5,000,000	I $5,000,001– $25,000,000	J $25,000,001– $50,000,000	K Over $50,000,000
Example	First Bank of Wilmington, Delaware	Mortgage on 123 Main St., Dover, Del.				X						
S	FirstAR Bank Chicago IL	mortgage on 6634 N Melrose Chgo IL unit A1		X								

SCHEDULE VI — GIFTS

Report the source, a brief description, and the value of all gifts totalling more than $250 received by you, your spouse, or a dependent child from any source during the year.

Exclude: Gifts from relatives, gifts of personal hospitality of an individual, local meals, and gifts to a spouse or dependent child that are totally independent of his or her relationship to you. Gifts with a value of $100 or less need not be added towards the $250 disclosure threshold.

Note: The gift rule (House Rule 51) prohibits gifts except as specifically provided in the rule.

Source	Description	Value
Example Mr. Joseph H. Smith, Anytown, Anystate	Silver Platter (determination on personal friendship received from Committee on Standards)	$270

Use additional sheets if more space is required.

SCHEDULE VIII — POSITIONS

Report all positions, compensated or uncompensated, held during the current calendar year as an officer, director, trustee of an organization, partner, proprietor, representative, employee, or consultant of any corporation, firm, partnership, or other business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States.

Exclude: Positions held in any religious, social, fraternal, or political entities; positions solely of an honorary nature; and positions listed on Schedule I.

Position	Name of Organization

SCHEDULE IX — AGREEMENTS

Identify the date, parties to, and general terms of any agreement or arrangement with respect to: future employment; a leave of absence during the period of government service; continuation or deferral of payments by a former or current employer other than the U.S. Government; or continuing participation in an employee welfare or benefit plan maintained by a former employer.

Date	Parties To	Terms of Agreement
~~VARIOUS DATES~~ WHEN EACH CASE WAS SIGNED ALL BEFORE 1/1/97	CLIFFORD LAW OFFICES, CHICAGO IL SUSSMAN SELIG & ROSS, CHICAGO IL LAW OFFICE / MICHAEL NICHOLSON, CHGO IL KAPLAN AND SOBOSKY, CHICAGO IL	CO-COUNSEL FEES ON OUTSTANDING LEGAL CASES WHICH PRECEEDED JAN. 7, 1997 TO BE PAID ON A CONTINGENCY BASIS UPON THE SETTLEMENT OF THE CASE.

GPO 1998 46-260 (mac)

Use additional sheets if more space is required.

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(Office Use Only)

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1997

Form A
For use by Members, officers, and employees

Thomas J. Bliley, Jr
(Full Name)

2409 Rayburn House Office Building
(Mailing Address)

Washington DC 20515

Daytime Telephone
202/225-2815

Filer Status	[X]	Member of the U.S. House of Representatives	State VA District 07	[ ]	Officer or Employee	Employing Office
Report Type	[X]	Annual (May 15)	[ ] Amendment	[ ]	Termination	Termination Date

A $200 penalty shall be assessed against anyone who files more than 30 days late.

PRELIMINARY INFORMATION -- ANSWER EACH OF THESE QUESTIONS

I. Did you or your spouse have "earned" income (e.g., salaries or fees) of $200 or more from any source in the reporting period? **If yes, complete and attach Schedule I.** Yes [ ] No [X]

II. Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? **If yes, complete and attach Schedule II.** Yes [X] No [ ]

III. Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? **If yes, complete and attach Schedule III.** Yes [X] No [ ]

IV. Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset worth more than $1,000 in the reporting period? **If yes, complete and attach Schedule IV.** Yes [X] No [ ]

V. Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? **If yes, complete and attach Schedule V.** Yes [ ] No [X]

VI. Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $250 and not otherwise exempt)? **If yes, complete and attach Schedule VI.** Yes [X] No [ ]

VII. Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $250 from one source)? **If yes, complete and attach Schedule VII.** Yes [X] No [ ]

VIII. Did you hold any reportable positions on or before the date of filing in the current calendar year? **If yes, complete and attach Schedule VIII.** Yes [X] No [ ]

IX. Did you have any reportable agreement or arrangement with an outside entity? **If yes, complete and attach Schedule IX.** Yes [ ] No [X]

Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION -- ANSWER EACH OF THESE QUESTIONS

TRUSTS-Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child? (See Instructions, pages 10-11.) Yes [X] No [ ]

EXEMPTION-Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption? (See Instructions, page 11.) Yes [ ] No [X]

CERTIFICATION -- THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended. The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct or its designee. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil penalties and criminal sanctions (See 5 U.S.C. app. 4, 104 and 18 U.S.C. 1001).

SIGNATURE OF REPORTING INDIVIDUAL: Tom Bliley

DATE (Month/Day/Year): 5-12-98

340

SCHEDULE II -- PAYMENTS IN LIEU OF HONORARIA MADE TO CHARITY

List the source, activity (i e , speech, appearance, or article), date, and amount of any payment made by the sponsor of an event to a charitable organization in lieu of an honorarium A separate confidential list of charities receiving such payments must be filed directly with the Committe on Standards of Official Conduct An envelope for transmitting the list is included in each Member's filing package For further information, see Instructions, pages 13-14

	Source	Activity	Date	Amount
Examples	Association of American Associations, Wash , D.C	Speech	Feb 2, 1994	$2,000
	XYZ Magazine	Article	Aug 13, 1994	$500
	Chemical Manufacturers Assn	Speech	05/08/97	$1,000 00
	Chemical Manufacturers Assn	Speech	05/08/97	$1,000 00

SCHEDULE III -- ASSETS AND "UNEARNED" INCOME

BLOCK A **Asset and/or Income Source** Identify (a) each asset held for investment or production of income with a fair market value exceeding $1,000 at the end of the reporting year, and (b) any other asset or source of income which generated more than $200 in "unearned" income during the year. For rental property or land, provide an address. Provide full names of any mutual funds. For an IRA or retirement plan that is *self-directed*, list the underlying assets worth more than $1,000. For an IRA or retirement plan that is *not* self-directed, name the institution holding the account **Exclude:** Your personal residence(s) (unless there is rental income); any debt owed to you by your spouse, or by your or your spouse's child, parent, or sibling; any deposits totalling $5,000 or less in personal savings accounts; any financial interests in or income derived from U.S. Government retirement programs. If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC) or is jointly held (JT), in the optional column on the far left For further information, see instructions, pages 14-20	BLOCK B **Value of Asset** at close of reporting year If you use a valuation method other than fair market value, please specify the method used If an asset was sold and is included only because it generated income, the value should be "None"	BLOCK C **Type of Income** If other than one of the listed categories, specify the type of income by writing a brief description in this block	BLOCK D **Amount of Income** For IRA's and retirement plans that are *not* self-directed, you may write in "NA" for income	BLOCK E **Transaction** Indicate if asset was purchased(P), sold(S), or exchanged(E) in reporting year
SP DC *Examples* SP JT	Mega Corp Stock 123 Main St., Dover, Del 1st Bank of Paducah, KY accounts	$15,001 - $50,000 $250,001 - $500,000 $50,001 - $100,000	Dividends Rent Interest	$201 - $1,000 $1,001 - $2,500 $5,001 - $15,000	P
Tom Bliley Blind Trust		$500,001 - $1,000,000	Qualified Blind Trust	$15,001 - $50,000	
Mary Virginia Bliley Blind Trust		$500,001 - $1,000,000	Qualified Blind Trust	$15,001 - $50,000	
New Economy Fund (Keogh)		None	Dividends	~~None~~ NA	E
IRA-Davenport & Co. of VA		$15,001 - $50,000	Interest	~~None~~ NA	IRA
Prudential Insurance		$1,001 - $15,000	Interest	$1 - $200	
2505 Winston Court, Glen Allen, VA		$50,001 - $100,000	None	None	
Jefferson National Bank (checking)		$1,001 - $15,000	Interest	$1 - $200	

SCHEDULE III -- ASSETS AND "UNEARNED" INCOME

	Cong. Federal Credit Union (checking)	$1 - $1,000	Interest	$1 - $200	
	Capitol World Growth & Income Fund (Keogh)	$1,001 - $15,000	Capital Gains and Dividends	None	E
	Thomas J. Bliley, Sr Estate	None	Capital Gains and Dividends	$1,001 - $2,500	Inheritence

SCHEDULE IV -- TRANSACTIONS

Report any purchase, sale, or exchange by you, your spouse, or dependent child during the reporting year of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction exceeded $1,000 Include transactions that resulted in a loss Do not report a transaction between you, your spouse, or your dependent child, or the purchase or sale of your personal residence, unless it is rented out For further information, see Instructions, pages 20-21

SP,DC,JT	Asset	Type of Transaction	Date	Amount of Transaction
	Example Mega Corporation Common Stock	Purchase	10/12/94	$15,001 - $50,000
	Capitol World Growth & Income Fund	Exchange	03/14/97	$1,001 - $15,000
	New Economy Fund	Exchange	03/14/97	$1,001 - $15,000

SCHEDULE VI -- GIFTS

Report the source, a brief description, and the value of all gifts totalling more than $250 received by you, your spouse, or a dependent child from any source during the year
Exclude: Gifts from relatives, gifts of personal hospitality of an individual, local meals, and gifts to a spouse or dependent child that are totally independent of his or her relationship to you. Gifts with a value of $100 or less need not be added towards the $250 disclosure threshold.
Note: The gift rule (House Rule 52 in the 104th Congress, renumbered as House Rule 51 of the 105th Congress) prohibits gifts except as specifically provided in the rule.
For further information, see Instructions, pages 22-24.

Source	Description	Value
Example: Mr. Joseph H. Smith, Anytown, Anystate	Silver Platter (waiver received from Committee on Standards)	$270
Cellular Telecommunications Industry Assn.	Waterford Bowl (waiver received from Committee on Standards)	$275.00

SCHEDULE VII -- TRAVEL PAYMENTS AND REIMBURSEMENTS

Identify the source and list travel itinerary, dates, and nature of expenses provided for travel and travel-related expenses totalling more than $250 received by you, your spouse, or a dependent child during the reporting period. Indicate whether a family member accompanied the traveler at the sponsor's expense, and the amount of time, if any, that was not at the sponsor's expense. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor.
Exclude: Travel-related expenses provided by federal, state and local governments, or by a foreign government required to be separately reported under the Foreign Gifts and Decorations Act (5 U.S.C. 7342), travel paid for by a Federal political committee, travel provided to a spouse or dependent child that is totally independent of his or her relationship to you. For further information, see instructions, pages 24-26.

Source	Date(s)	Point of Departure--Destination--Point of Return	Lodging? (Y/N)	Food? (Y/N)	Was a Family Member Included? (Y/N)	Any time not at sponsor's expense
Examples Chicago Chamber of Commerce	Mar 2	Wash., D.C.-Chicago-Wash., D.C.	N	N	N	N
Mega Corporation	Aug 6-13	Wash., D.C.-Los Angeles-Cleveland	Y	Y	Y	4 Days
Edison Electric Institute	01/09/97	Washington, DC-Phoenix, AZ-Washington, DC	N	Y	N	N
Congressional Institute	01/21-23/97	Washington, DC-Airlie, VA-Washington, DC	Y	Y	N	N
Soap & Detergent Assn	01/30 - 02/01/97	Richmond, VA-Boca Raton, FL-Richmond, VA	Y	Y	Y	N
Donaldson, Lufkin & Jenrette	06/16/97	Washington, DC-New York, NY-Washington, DC	N	Y	N	N
New York Stock Exchange/Morgan Stanley	12/12/97	Washington, DC-New York, NY-Washington, DC	N	Y	N	N

SCHEDULE VIII -- POSITIONS

Report all positions, compensated or uncompensated, held during the current calendar year as an officer, director, trustee of an organization, partner, proprietor, representative, employee, or consultant of any corporation, firm, partnership, or other business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States For further information, see Instructions, page 26

Exclude: Positions held in any religious, social, fraternal, or political entities, positions solely of an honorary nature, and positions listed on Schedule I

Position	Organization
Board Member	Virginia Biotechnology Research Park Authority

EARL BLUMENAUER
THIRD DISTRICT, OREGON

COMMITTEE
TRANSPORTATION AND INFRASTRUCTURE

SUBCOMMITTEES
RAILROADS
WATER RESOURCES AND ENVIRONMENT

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WASHINGTON OFFICE
1113 LONGWORTH BUILDING
WASHINGTON, DC 20515–3703
(202) 225–4811

DISTRICT OFFICE
THE WEATHERLY BUILDING
516 S.E. MORRISON STREET
SUITE 250
PORTLAND, OR 97214
(503) 231–7300
email: write earl@mail.house.gov
website: http://www.house.gov/blumenauer

Congress of the United States
House of Representatives
Washington, DC

May 15, 1998

(6)

The Honorable Clerk of the House
Office of Public Records
Cannon B-106
Washington, D.C. 20515

Dear Ms. Carle

Attached please find the Financial Disclosure Statement for 1997 for Congressman Earl F. Blumenauer. Congressman Blumenauer has reviewed and approved this four page document and signed the front page in his district. The original signature page will be received in D.C. next week. Please accept this faxed copy in replace of that page until it arrives.

Thank you

Sincerely,

Stephanie Henley

Stephanie Henley
Office Manager

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CLERK OF THE HOUSE
OF REPRESENTATIVES

UNITED STATES HOUSE OF REPRESENTATIVES

Form A
For use by Members, officers, and employees

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1997

Earl F. Blumenauer
(Full Name)

1113 Longworth Building
(Mailing Address)

Washington DC 20515

Daytime Telephone: 202-22-4811

HAND DELIVERED
(Office Use Only)

Filer Status: [X] Member of the U.S. House of Representatives — State: OR, District: 03 — [ ] Officer or Employee — Employing Office:

Report Type: [X] Annual (May 15) — [ ] Amendment — [ ] Termination — Termination Date:

A $200 penalty shall be assessed against anyone who files more than 30 days late.

PRELIMINARY INFORMATION -- ANSWER EACH OF THESE QUESTIONS

I. Did you or your spouse have "earned" income (e.g., salaries or fees) of $200 or more from any source in the reporting period? If yes, complete and attach Schedule I. — Yes [ ] No [X]

II. Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? If yes, complete and attach Schedule II. — Yes [ ] No [X]

III. Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? If yes, complete and attach Schedule III. — Yes [X] No [ ]

IV. Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset worth more than $1,000 in the reporting period? If yes, complete and attach Schedule IV. — Yes [ ] No [X]

V. Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? If yes, complete and attach Schedule V. — Yes [X] No [ ]

VI. Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $250 and not otherwise exempt)? If yes, complete and attach Schedule VI. — Yes [ ] No [X]

VII. Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $250 from one source)? If yes, complete and attach Schedule VII. — Yes [X] No [ ]

VIII. Did you hold any reportable positions on or before the date of filing in the current calendar year? If yes, complete and attach Schedule VIII. — Yes [ ] No [X]

IX. Did you have any reportable agreement or arrangement with an outside entity? If yes, complete and attach Schedule IX. — Yes [ ] No [X]

Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION -- ANSWER EACH OF THESE QUESTIONS

TRUSTS - Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child? — Yes [ ] No [X]

EXEMPTION - Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption? — Yes [ ] No [X]

CERTIFICATION -- THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended. The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct or its designee. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil penalties and criminal sanctions (See 5 U.S.C. app. 4, 104 and 18 U.S.C 1001)

SIGNATURE OF REPORTING INDIVIDUAL: Earl Blumenauer — DATE (Month/Day/Year): 15 May 1998

MAY-15-98 FRI 08:43 AM CONGRESSMAN BLUMENAUER FAX NO. 2367702 P. 02
05/14/98 15:28 001

SCHEDULE III -- ASSETS AND "UNEARNED" INCOME

	BLOCK A **Asset and/or Income Source** Identify (a) each asset held for investment or production of income with a fair market value exceeding $1,000 at the end of the reporting year, and (b) any other asset or source of income which generated more than $200 in "unearned" income during the year. For rental property or land, provide an address. Provide full names of any mutual funds. For an IRA or retirement plan that is *self-directed*, list the underlying assets worth more than $1,000. For an IRA or retirement plan that is *not* self-directed, name the institution holding the account. **Exclude:** Your personal residence(s) (unless there is rental income); any debt owed to you by your spouse, or by your or your spouse's child, parent, or sibling; any deposits totalling $5,000 or less in personal savings accounts; any financial interests in or income derived from U.S. Government retirement programs. If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC) or is jointly held (JT), in the optional column on the far left.	BLOCK B **Value of Asset** at close of reporting year If you use a valuation method other than fair market value, please specify the method used. If an asset was sold and is included only because it generated income, the value should be "None."	BLOCK C **Type of Income** If other than one of the listed categories, specify the type of income by writing a brief description in this block.	BLOCK D **Amount of Income** For IRA's and retirement plans that are *not* self-directed, you may write in "NA" for income	BLOCK E **Transaction** Indicate if asset was purchased(P), sold(S), or exchanged(E) in reporting year
SP, DC, JT	*Examples:* SP Mega Corp. Stock SP 123 Main St., Dover, Del. 1st Bank of Paducah, KY accounts	$15,001 - $50,000 $250,001 - $500,000 $50,001 - $100,000	Dividends Rent Interest	$201 - $1,000 $1,001 - $2,500 $5,001 - $15,000	P
	Mutal Beacon	$1,001 - $15,000	Dividends	$1,001 - $2,500	NA
	Mutual Discovery	$50,001 - $100,000	Dividends	$5,001 - $15,000	NA
	T.R. Price-New Asia	$1,001 - $15,000	Dividends	$1 - $200	NA
	Aetna Variable Encore Fund	$1,001 - $15,000	Dividends	$201 - $1,000	NA
	Aetna Fixed Plus Account	$15,001 - $50,000	Dividends	$1,001 - $2,500	NA
	MFS Value Equity (old name-Neuberger Berman Growth Portfolio)	$15,001 - $50,000	Dividends	$5,001 - $15,000	NA
	Scudder International Portfolio	$1,001 - $15,000	Dividends	$201 - $1,000	NA

SCHEDULE III -- ASSETS AND "UNEARNED" INCOME

	MFS Emergining Equities (old name - Alger American Small Cap)	$1,001 - $15,000	Dividends	$201 - $1,000	NA
	Melissa Anne Apartments, LLC 7720 E.Burnside, Portland, OR	$50,001 - $100,000	Rent	$5,001 - $15,000	NA
	Apartments 3701-3705 SE 35th Place Portland, OR	$50,001 - $100,000	Rent	$5,001 - $15,000	NA
	Apartment 3803 SE 35th Place Portland, OR	$15,001 - $50,000	Rent	$2,501 - $5,000	NA
	Apartment 1517 NE 8th Westcott Ct. Apts. LLC, Portland, OR	$50,001 - $100,000	Rent	$5,001 - $15,000	NA
	Oak St. Rowhouse 1309 SE Oak Portland, OR	$100,001 - $250,000	Rent	$2,501 - $5,000	NA
	Congressional Credit Union	$1,001 - $15,000	Interest	$201 - $1,000	NA
	House 2581 NE 31st Portland, OR	$100,001 - $250,000	Rent	$2,501 - $5,000	NA
	510-6th Street SE Apt. B Washington, D.C.	$100,001 - $250,000	Rent	$5,001 - $15,000	NA
	Bank of America (Savings)	$15,001 - $50,000	Interest	$201 - $1,000	NA
	Portland Teachers Credit Union	$1,001 - $15,000	Interest	$1 - $200	NA
	Schwab Money Market (Crabbe/Hudson rolled into Schwab)	$1,001 - $15,000	Interest	$201 - $1,000	NA
	Crabbe/Huson Equity Fund	$15,001 - $50,000	Dividends	$201 - $1,000	NA
	Crabbe/Huson Special Fund	$1,001 - $15,000	Dividends	$201 - $1,000	NA
	Japan (Scudder) Fund	$1,001 - $15,000	Dividends	$1 - $200	NA
	NIKE	$1,001 - $15,000	Dividends	$1 - $200	NA
	Schwab 1000	$1,001 - $15,000	Dividends	$1 - $200	NA
	Schwab Small Cap	$1,001 - $15,000	Dividends	$1 - $200	NA

SCHEDULE V -- LIABILITIES

Report liabilities of over $10,000 owed to any one creditor ***at any time*** during the reporting period by you, your spouse, or dependent child. Mark the highest amount owed during the year.
Exclude: Any mortgage on your personal residence (unless it is rented out), loans secured by automobiles, household furniture, or appliances, and liabilities owed to a spouse, or the child, parent, or sibling of you or your spouse. Report ***revolving charge accounts*** only if the balance at the end of the reporting period exceeded $10,000.

SP,DC,JT	Creditor	Type of Liability	Amount of Liability
	Example: First Bank of Wilmington, Delaware	Mortgage on 123 Main St., Dover, Del	$100,001 - $250,000
	National Pacific Mortgage Corp. Anaheim, CA	mortgage, 1309 SE Oak Portland, OR	$50,001 - $100,000
	Continental	mortgage, 7720 E. Burnside Portland, OR	$15,001 - $50,000
	West One Bank	mortgage, 3701-3705 SE 35th Place Portland, OR	$15,001 - $50,000
	Private note with J.D. Holm, previous owner	mortgage, 3803 SE 35th Portland, OR	$15,001 - $50,000
	First Security Bank Portland, OR	mortgage, 1517 NE 8th Street Portland, OR	$15,001 - $50,000
	Northwest Mortgage	mortgage, 510 SE 6th, Wash. D.C.	$100,001 - $250,000
	Midwest Loan	mortgage, 510 SE 6th, Wash. D.C.	$15,001 - $50,000
	GMAC Mortgage	mortgage, 2581 NE 31st, Portland, OR	$100,001 - $250,000

SCHEDULE VII -- TRAVEL PAYMENTS AND REIMBURSEMENTS

Identify the source and list travel itinerary, dates, and nature of expenses provided for travel and travel-related expenses totalling more than $250 received by you, your spouse, or a dependent child during the reporting period. Indicate whether a family member accompanied the traveler at the sponsor's expense, and the amount of time, if any, that was not at the sponsor's expense. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor.
Exclude: Travel-related expenses provided by federal, state and local governments, or by a foreign government required to be separately reported under the Foreign Gifts and Decorations Act (5 U.S.C. 7342); travel paid for by a Federal political committee; travel provided to a spouse or dependent child that is totally independent of his or her relationship to you.

Source	Date(s)	Point of Departure--Destination--Point of Return	Lodging? (Y/N)	Food? (Y/N)	Was a Family Member Included? (Y/N)	Any time not at sponsor's expense
Examples: Chicago Chamber of Commerce	Mar 2	Wash., D.C.-Chicago-Wash., D.C.	N	N	N	N
Mega Corporation	Aug 6-13	Wash., D.C.-Los Angeles-Cleveland	Y	Y	Y	4 Days
University of Pittsburgh, Inst. of Politics	Jan. 23-24	Newport News, VA - Pittsburgh, Pdx, OR	Y	Y	N	none
Pew charitable Trust Grant to Aspen Institute (Bipartisan Retreat)	March 7-9	D.C.-Hershey, Penn.- D.C.	Y	Y	N	none
Alliance for Modern Transit	March 27-28	Denver, CO - Tampa, FL - Portland, OR	Y	Y	N	none
Chautauqua Institution	June 2-3	Portland, OR - Buffalo, NY - D.C.	Y	Y	N	none
Maryland Mass Transit Assoc.	June 3-4	D.C. - Baltimore, MD - D.C.	Y	Y	N	none
Paul Ehrhardt & Richard Maine, (Hartford Transit District)	July 17-18	D.C. - Harford, CT	Y	Y	N	none
US Fans	Sept. 21-22	Seattle, WA - Fort Lauderdal, FL - D.C.	Y	Y	N	none
Rail~Volution	Oct. 25-28	D.C. - St. Louis, MO - D.C.	Y	Y	N	none
American Institute of Architects - Pittsburgh Chapter	Nov. 16-18	Portland, OR - Pittsburgh, PA	Y	Y	N	none
Aspen Institute Community Forum	Dec. 7-10	DC - Aspen, CO to Denver, CO to Portland, OR	Y	Y	N	1 day

EARL BLUMENAUER
THIRD DISTRICT, OREGON
COMMITTEE
TRANSPORTATION AND INFRASTRUCTURE
SUBCOMMITTEES
RAILROADS
WATER RESOURCES AND ENVIRONMENT

RECEIVED
98 MAY 18 PM 3:09

HAND DELIVERED

WASHINGTON OFFICE
1113 LONGWORTH BUILDING
WASHINGTON, DC 20515-3703
(202) 225-4811
DISTRICT OFFICE
THE WEATHERLY BUILDING
516 S.E. MORRISON STREET
SUITE 250
PORTLAND, OR 97214
(503) 231-2300
email: write.earl@mail.house.gov
website: http://www.house.gov/blumenauer

Congress of the United States
House of Representatives
Washington, DC

(2)

May 18, 1998

Robin Carle
Clerk of the House
B-160 Cannon
Washington, D.C. 20515

Dear Ms. Carle,

Attached please find the original signature page to my Public Disclosure Form for 1997. I signed and dated this form last Friday in my district. A faxed copy page of this page accompanied my report that was submitted on May 15.

Sincerely,

Earl Blumenauer

Earl Blumenauer
Member of Congress

PRINTED ON RECYCLED PAPER

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UNITED STATES HOUSE OF REPRESENTATIVES

Form A
For use by Members, officers, and employees

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1997

HAND DELIVERED

Earl F. Blumenauer
(Full Name)

1113 Longworth Building
(Mailing Address)

Washington DC 20515
Daytime Telephone: 202-22-4811

(Office Use Only)

Filer Status: [X] Member of the U.S. House of Representatives — State OR, District 03 — [ ] Officer or Employee — Employing Office:

Report Type: [X] Annual (May 15) — [ ] Amendment — [ ] Termination — Termination Date:

A $200 penalty shall be assessed against anyone who files more than 30 days late.

PRELIMINARY INFORMATION -- ANSWER EACH OF THESE QUESTIONS

I. Did you or your spouse have "earned" income (e.g., salaries or fees) of $200 or more from any source in the reporting period? **If yes, complete and attach Schedule I.** Yes [ ] No [X]

II. Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? **If yes, complete and attach Schedule II.** Yes [ ] No [X]

III. Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? **If yes, complete and attach Schedule III** Yes [X] No [ ]

IV. Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset worth more than $1,000 in the reporting period? **If yes, complete and attach Schedule IV.** Yes [ ] No [X]

V. Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? **If yes, complete and attach Schedule V.** Yes [X] No [ ]

VI. Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $250 and not otherwise exempt)? **If yes, complete and attach Schedule VI.** Yes [ ] No [X]

VII. Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $250 from one source)? **If yes, complete and attach Schedule VII.** Yes [X] No [ ]

VIII. Did you hold any reportable positions on or before the date of filing in the current calendar year? **If yes, complete and attach Schedule VIII.** Yes [ ] No [X]

IX. Did you have any reportable agreement or arrangement with an outside entity? **If yes, complete and attach Schedule IX.** Yes [ ] No [X]

Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION -- ANSWER EACH OF THESE QUESTIONS

TRUSTS--Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child? Yes [ ] No [X]

EXEMPTION. Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption? Yes [ ] No [X]

CERTIFICATION -- THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended. The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct or its designee. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil penalties and criminal sanctions (See 5 U.S.C. app. 4, 104 and 18 U.S.C. 1001).

SIGNATURE OF REPORTING INDIVIDUAL: Earl Blumenauer

DATE (Month/Day/Year): 15 May 1998

001

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355

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1997

FORM A
For use by Members, officers, and employees

93 APR 22 12 2 22

OFFICE OF THE CLERK
U.S. HOUSE OF REPRESENTATIVES

(8)

Roy Blunt
(Full Name)

P.O. Box 278
(Mailing Address)

Stafford, Missouri 65757

Daytime Telephone
202-225-6536

MC INSIDE MAIL
(Office Use Only)

Filer Status: [X] Member of the U.S. House of Representatives — State ____ District ____ [ ] Officer or Employee — Employing Office ____

Report Type: [X] Annual (May 15) [ ] Amendment [ ] Termination — Termination Date ____

A *$200 penalty* shall be assessed against anyone who files more than 30 days late.

PRELIMINARY INFORMATION — ANSWER EACH OF THESE QUESTIONS

I	Did you or your spouse have "earned" income (e.g., salaries or fees) of $200 or more from any source in the reporting period? **If yes, complete and attach Schedule I.**	Yes [X]	No [ ]	VI. Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $250 and not otherwise exempt)? **If yes, complete and attach Schedule VI.**	Yes [ ]	No [X]
II	Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? **If yes, complete and attach Schedule II.**	Yes [X]	No [ ]	VII Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $250 from one source)? **If yes, complete and attach Schedule VII.**	Yes [X]	No [ ]
III.	Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? **If yes, complete and attach Schedule III.**	Yes [X]	No [ ]	VIII. Did you hold any reportable positions on or before the date of filing in the current calendar year? **If yes, complete and attach Schedule VIII.**	Yes [ ]	No [X]
IV	Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset worth more than $1,000 in the reporting period? **If yes, complete and attach Schedule IV.**	Yes [ ]	No [X]	IX. Did you have any reportable agreement or arrangement with an outside entity? **If yes, complete and attach Schedule IX.**	Yes [X]	No [ ]
V	Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? **If yes, complete and attach Schedule V.**	Yes [X]	No [ ]	**Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.**		

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION — ANSWER EACH OF THESE QUESTIONS

TRUSTS—Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child?	Yes [ ]	No [X]
EXEMPTION—Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption?	Yes [ ]	No [X]

CERTIFICATION — THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended. The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct or its designee. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil penalties and criminal sanctions (*See* 5 U.S.C. app. 4, §104 and 18 U.S.C §1001).

SIGNATURE OF REPORTING INDIVIDUAL: Roy Blunt

DATE (Month/Day/Year): April 10, 1998

Name Blunt, Roy	Page 2 of 7

SCHEDULE I — EARNED INCOME

List the source, type, and amount of earned income from any source (other than the filer's current employment by the U.S. Government) totalling $200 or more during the preceding calendar year. For a spouse, list the source and amount of any honoraria; list only the source for other spouse earned income exceeding $1,000.

	Source		Type	Amount
Examples	Keene State		Approved Teaching Fee	$6,000
	State of Maryland		Legislative Pension	$9,000
	Civil War Roundtable (Oct. 2nd)		Spouse Speech	$1,000
	Ontario County Board of Education		Spouse Salary	NA
	U.S. House of Representatives - Wash. D.C.	1997	Salary	121,724.58
	Wilson's Creek National Battlefield Foundation Springfield, Missouri	1997	Spouse's salary	NA

For payments to charity in lieu of honoraria, use Schedule II.

Name Blunt, Roy	Page 3 of 7

SCHEDULE II — PAYMENTS IN LIEU OF HONORARIA MADE TO CHARITY

List the source, activity (i.e., speech, appearance, or article), date, and amount of any payment made by the sponsor of an event to a charitable organization in lieu of an honorarium. A separate confidential list of charities receiving such payments must be filed directly with the Committee on Standards of Official Conduct. An envelope for transmitting the list is included in each Member's filing package.

Source	Activity	Date	Amount
Examples: Association of American Associations, Wash., D.C.	Speech	Feb. 2, 1997	$2,000
XYZ Magazine	Article	Aug. 13, 1997	$500
Edward Jones Inc. 12555 Manchester Rd St. Louis, Mo. 63131-3729	Speech	Feb, 26, 1997	2000.00

This page may be copied if more space is required.

Name Blunt, Roy | Page 4 of 7

SCHEDULE III — ASSETS AND "UNEARNED" INCOME

BLOCK A — Asset and/or Income Source

Identify (a) each asset held for investment or production of income with a fair market value exceeding $1,000 at the end of the reporting year, and (b) any other asset or source of income which generated more than $200 in "unearned" income during the year. For rental property or land, provide an address. Provide full names of any mutual funds. For an IRA or retirement plan that is *self-directed*, list the underlying assets worth more than $1,000. For an IRA or retirement plan that is not self-directed, name the institution holding the account.

Exclude: Your personal residence(s) (unless there is rental income); any debt owed to you by your spouse, or by your or your spouse's child, parent, or sibling; any deposits totalling $5,000 or less in personal savings accounts; any financial interests in or income derived from U.S. Government retirement programs.

If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC) or is jointly held (JT), in the optional column on the far left.

BLOCK B — Value of Asset

at close of reporting year. If you use a valuation method other than fair market value, please specify the method used. If an asset was sold and is included only because it generated income, the value should be "None."

BLOCK C — Type of Income

BLOCK D — Amount of Income

For IRA's and retirement plans that are *not* self-directed, you may write in "NA" for income.

BLOCK E — Transaction

Indicate if asset was purchased (P), sold (S), or exchanged (E) in reporting year

			A None	B $1 – $1,000	C $1,001 – $15,000	$15,001 – $50,000	E $50,001 – $100,000	F $100,001 – $250,000	G $250,001 – $500,000	H $500,001 – $1,000,000	I $1,000,001 – $5,000,000	J $5,000,001 – $25,000,000	K $25,000,001 – $50,000,000	L Over $50,000,000	DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Type of Income (Specify: For Example: Partnership Income or Farm Income)	I None	II $1 – $200	III $201 – $1,000	IV $1,001 – $2,500	V $2,501 – $5,000	VI $5,001 – $15,000	VII $15,001 – $50,000	VIII $50,001 – $100,000	IX $100,001 – $1,000,000	X $1,000,001 – $5,000,000	XI Over $5,000,000	P, S, E, P
SP, DC, JT	*Examples*	SP																														
			Mega Corp Stock					X							X																		P
			Simon & Schuster			Indefinite															Royalties												
			1st Bank of Paducah, KY accounts						X								X									X						
JT			Commercial Bldg 113 Pine / Stratford			X										X										X						
JT			10 Acres Buncombe Blvd / Stratford			X																X										
			First BANKshares, Inc / stock			X									X								X									
SP			WALMART Stores, Inc / Stock			X									X								X									
			HARTFORD Mutual Funds CLA		X										X																	
JT			*925 Oak Terrace Bolivar, Mo						X						*please note below															X		S	

For additional assets and unearned income, use next page.

*personal residence in Bolivar - sold to Southwest BAPTIST University Contract for deed

Name Blunt, Roy | Page 5 of 7

SCHEDULE V — LIABILITIES

Report liabilities of over $10,000 owed to any one creditor ***at any time*** during the reporting period by you, your spouse, or dependent child. Mark the highest amount owed during the year. **Exclude:** Any mortgage on your personal residence (unless it is rented out); loans secured by automobiles, household furniture, or appliances; and liabilities owed to a spouse, or the child, parent, or sibling of you or your spouse. Report ***revolving charge accounts*** only if the balance at the end of the reporting period exceeded $10,000.

SP, DC, JT	Creditor	Type of Liability	Amount of Liability									
			B $10,001–$15,000	C $15,001–$50,000	D $50,001–$100,000	E $100,001–$250,000	F $250,001–$500,000	G $500,001–$1,000,000	H $1,000,001–$5,000,000	I $5,000,001–$25,000,000	J $25,000,001–$50,000,000	K Over $50,000,000
	Example: First Bank of Wilmington, Delaware	Mortgage on 123 Main St., Dover, Del.				x						
JT	Greene County Bank Stratford, Neb	Mortgage on 113 Pine Stratford		X								
JT	Greene County BANK Stratford, Neb	Mortgage on 10 acres Stratford		X								

SCHEDULE VI — GIFTS

Report the source, a brief description, and the value of all gifts totalling more than $250 received by you, your spouse, or a dependent child from any source during the year.

Exclude: Gifts from relatives, gifts of personal hospitality of an individual, local meals, and gifts to a spouse or dependent child that are totally independent of his or her relationship to you. Gifts with a value of $100 or less need not be added towards the $250 disclosure threshold.

Note: The gift rule (House Rule 51) prohibits gifts except as specifically provided in the rule.

Source	Description	Value
Example. Mr. Joseph H. Smith, Anytown, Anystate	Silver Platter (determination on personal friendship received from Committee on Standards)	$270

Use additional sheets if more space is required.

Name Blunt, Roy | Page 6 of 7

SCHEDULE VII —TRAVEL PAYMENTS AND REIMBURSEMENTS

Identify the source and list travel itinerary, dates, and nature of expenses provided for travel and travel-related expenses totalling more than $250 received by you, your spouse, or a dependent child during the reporting period. Indicate whether a family member accompanied the traveler at the sponsor's expense, and the amount of time, if any, that was not at the sponsor's expense. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor.

Exclude: Travel-related expenses provided by federal, state, and local governments, or by a foreign government required to be separately reported under the Foreign Gifts and Decorations Act (5 U.S.C. § 7342); travel paid for by a Federal political committee; travel provided to a spouse or dependent child that is totally independent of his or her relationship to you.

Source	Date(s)	Point of Departure—Destination—Point of Return	Lodging? (Y/N)	Food? (Y/N)	Was a Family Member Included? (Y/N)	Any time not at sponsor's expense
Examples: Chicago Chamber of Commerce	Mar. 2	Wash., D.C.—Chicago—Wash., D.C.	N	N	N	N
Examples: Roycroft Corporation	Aug. 6–13	Wash., D.C.—Los Angeles—Cleveland	Y	Y	Y	4 Days
Bipartisan Congressional Retreat Aspen Institute	Mar. 7-8	WASH. DC - Hershey Pa - WASH DC	Y		N	N
KLAMATH Alliance for Resource and Employment McCloud, Ca	April 2-5	WASH DC - McCloud Ca - WASH DC	Y	Y	Y	N
Kenmore Association Fredricksburg, VA	Nov 19-21	WASH DC - Charlottsville Va - DC	Y	Y	Y	N

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KENNETH E. BENTSEN, JR.
25TH DISTRICT, TEXAS

1236 CANNON HOUSE OFFICE BUILDING
WASHINGTON, DC 20515-4325
202) 225-7508
202) 225-2947 FAX
eMail: bentsen@hr.house.gov
http://www.house.gov/bentsen/welcome.html

COMMITTEES
BANKING AND FINANCIAL SERVICES

SUBCOMMITTEE ON
FINANCIAL INSTITUTIONS AND
CONSUMER CREDIT

SUBCOMMITTEE ON
DOMESTIC AND INTERNATIONAL
MONETARY POLICY

BUDGET

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98 JUN -4 PM 2:10

Congress of the United States
House of Representatives
Washington, DC 20515-4325

DISTRICT OFFICES
6575 WEST LOOP SOUTH
SUITE 496
BELLAIRE, TX 77401
(713) 667-3554
(713) 667-4833 FAX

1001 E. SOUTHMORE
SUITE 810
PASADENA, TX 77502
(713) 473-4334
(713) 475-8887 FAX

1300 ROLLINGBROOK DRIVE
SUITE 517
BAYTOWN, TX 77521
(281) 837-8225

HAND DELIVERED

June 2, 1998

Ms. Robin H. Carle
Clerk of the House
The Capitol, Room HT13
Washington, D.C. 20515

Dear Ms. Carle:

In reviewing my financial disclosure statement for Calendar Year 1997, I discovered an inadvertent error in filling out Schedule IV -- Transactions. Please find enclosed an amended disclosure statement.

Thank you for your attention to this matter

With kindest personal regards,

Sincerely,

Kenneth E. Bentsen, Jr
Member of Congress

KEB:vw

RECEIVED
LATIVE RESOURCE CTR.
98 JUN -4 PM 2:10
OFFICE OF THE CLERK
U.S. HOUSE OF REPRESENTATIVES
INSIDE MAIL
(Office Use Only)

UNITED STATES HOUSE OF REPRESENTATIVES
FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1997

Form A
For use by Members, officers, and employees

Kenneth E Bentsen, Jr
(Full Name)

128 Cannon House Office Building
(Mailing Address)

Washington, D C. DC 20515

Daytime Telephone: 202-225-7508

Filer Status
[X] Member of the U S House of Representatives — State TX, District 25
[ ] Officer or Employee — Employing Office:

Report Type
[ ] Annual (May 15)
[X] Amendment
[ ] Termination — Termination Date:

A $200 penalty shall be assessed against anyone who files more than 30 days late.

PRELIMINARY INFORMATION -- ANSWER EACH OF THESE QUESTIONS

I Did you or your spouse have "earned" income (e g , salaries or fees) of $200 or more from any source in the reporting period?
If yes, complete and attach Schedule I. Yes [X] No [ ]

II Did any individual or organization make a donation to charity in lieu of paying you for a speech, apppearance, or article in the reporting period?
If yes, complete and attach Schedule II. Yes [ ] No [X]

III Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period?
If yes, complete and attach Schedule III. Yes [X] No [ ]

IV Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset worth more than $1,000 in the reporting period?
If yes, complete and attach Schedule IV. Yes [X] No [ ]

V Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period?
If yes, complete and attach Schedule V. Yes [X] No [ ]

VI Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i e , aggregating more than $250 and not otherwise exempt)?
If yes, complete and attach Schedule VI. Yes [ ] No [X]

VII Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $250 from one source)?
If yes, complete and attach Schedule VII. Yes [X] No [ ]

VIII Did you hold any reportable positions on or before the date of filing in the current calendar year?
If yes, complete and attach Schedule VIII. Yes [ ] No [X]

IX Did you have any reportable agreement or arrangement with an outside entity?
If yes, complete and attach Schedule IX. Yes [X] No [ ]

Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION -- ANSWER EACH OF THESE QUESTIONS

TRUSTS- Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child? (See Instructions, pages 10-11.) Yes [ ] No [X]

EXEMPTION Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption? (See Instructions, page 11) Yes [ ] No [X]

CERTIFICATION -- THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct or its designee Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil penalties and criminal sanctions (See 5 U S C app. 4, 104 and 18 U.S C 1001)

SIGNATURE OF REPORTING INDIVIDUAL: Kenneth E. Bentsen

DATE (Month/Day/Year): 6-1-98

98 JUN -2 PM 4:55

263

98 MAY 14 PM 4:33

HAND DELIVERED (Office Use Only)

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1997

Form A
For use by Members, officers, and employees

Sherwood Boehlert
(Full Name)

2246 Rayburn Building
(Mailing Address)

Washington DC 20515

Daytime Telephone: 202/225/3665

Filer Status: [X] Member of the U.S. House of Representatives — State: NY District: 23 — [ ] Officer or Employee — Employing Office:

Report Type: [X] Annual (May 15) — [ ] Amendment — [ ] Termination — Termination Date:

A $200 penalty shall be assessed against anyone who files more than 30 days late.

PRELIMINARY INFORMATION -- ANSWER EACH OF THESE QUESTIONS

I. Did you or your spouse have "earned" income (e.g., salaries or fees) of $200 or more from any source in the reporting period? **If yes, complete and attach Schedule I.**	Yes [ ]	No [X]	VI. Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $250 and not otherwise exempt)? **If yes, complete and attach Schedule VI.**	Yes [ ]	No [X]
II. Did any individual or organization make a donation to charity in lieu of paying you for a speech, apppearance, or article in the reporting period? **If yes, complete and attach Schedule II.**	Yes [X]	No [ ]	VII. Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $250 from one source)? **If yes, complete and attach Schedule VII.**	Yes [X]	No [ ]
III. Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? **If yes, complete and attach Schedule III.**	Yes [X]	No [ ]	VIII. Did you hold any reportable positions on or before the date of filing in the current calendar year? **If yes, complete and attach Schedule VIII.**	Yes [X]	No [ ]
IV. Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset worth more than $1,000 in the reporting period? **If yes, complete and attach Schedule IV.**	Yes [X]	No [ ]	IX. Did you have any reportable agreement or arrangement with an outside entity? **If yes, complete and attach Schedule IX.**	Yes [ ]	No [X]
V. Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? **If yes, complete and attach Schedule V.**	Yes [ ]	No [X]	**Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.**		

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION -- ANSWER EACH OF THESE QUESTIONS

TRUSTS- Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child? (See Instructions, pages 10-11)	Yes [ ]	No [X]
EXEMPTION Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption? (See Instructions, page 11.)	Yes [ ]	No [X]

CERTIFICATION -- THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended. The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct or its designee. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil penalties and criminal sanctions (See 5 U.S.C. app. 4, 104 and 18 U.S.C. 1001).

SIGNATURE OF REPORTING INDIVIDUAL Sherwood Boehlert

DATE (Month/Day/Year) 5/14/98

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SCHEDULE II -- PAYMENTS IN LIEU OF HONORARIA MADE TO CHARITY

List the source, activity (i.e., speech, appearance, or article), date, and amount of any payment made by the sponsor of an event to a charitable organization in lieu of an honorarium. A separate confidential list of charities receiving such payments must be filed directly with the Committe on Standards of Official Conduct. An envelope for transmitting the list is included in each Member's filing package. For further information, see Instructions, pages 13-14

	Source	Activity	Date	Amount
Examples:	Association of American Associations, Wash., D.C.	Speech	Feb. 2, 1994	$2,000
	XYZ Magazine	Article	Aug. 13, 1994	$500
	Aerospace Industries Association	speech	10/08/97	$1,000.00
	American Bar Association	speech	10/02/97	$1,000.00
	Association of American Railroads	speech	09/10/97	$1,000.00
	CH2MHill Companies	speech	5/7/97	$2,000.00
	Coleman/Bartlett's Focus Group	speech	5/15/97	$1,000.00
	Grocery Manufacturers of America	speech	5/1/97	$500.00
	National Pork Producers Council	speech	9/11/97	$1,000.00
	National Association of Independent Insurers	speech	3/5/97	$500.00

Statement: All contributions to Utica College Endowed Scholarship Fund to benefit academically promising and financially needy students.

SCHEDULE III -- ASSETS AND "UNEARNED" INCOME

	BLOCK A **Asset and/or Income Source** Identify (a) each asset held for investment or production of income with a fair market value exceeding $1,000 at the end of the reporting year, and (b) any other asset or source of income which generated more than $200 in "unearned" income during the year. For rental property or land, provide an address. Provide full names of any mutual funds. For an IRA or retirement plan that is *self-directed*, list the underlying assets worth more than $1,000. For an IRA or retirement plan that is *not* self-directed, name the institution holding the account. **Exclude:** Your personal residence(s) (unless there is rental income); any debt owed to you by your spouse, or by your or your spouse's child, parent, or sibling; any deposits totalling $5,000 or less in personal savings accounts; any financial interests in or income derived from U.S. Government retirement programs. If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC) or is jointly held (JT), in the optional column on the far left. For further information, see Instructions, pages 14-20	BLOCK B **Value of Asset** at close of reporting year. If you use a valuation method other than fair market value, please specify the method used. If an asset was sold and is included only because it generated income, the value should be "None."	BLOCK C **Type of Income** If other than one of the listed categories, specify the type of income by writing a brief description in this block	BLOCK D **Amount of Income** For IRA's and retirement plans that are *not* self-directed, you may write in "NA" for income	BLOCK E **Transaction** Indicate if asset was purchased(P), sold(S), or exchanged(E) in reporting year
SP DC *Examples:* SP JT	Mega Corp. Stock 123 Main St., Dover, Del. 1st Bank of Paducah, KY accounts	$15,001 - $50,000 $250,001 - $500,000 $50,001 - $100,000	Dividends Rent Interest	$201 - $1,000 $1,001 - $2,500 $5,001 - $15,000	P
JT	GPO Credit Union	None	Interest	None	NA
JT	NBT Common Stock	$15,001 - $50,000	Dividends	$201 - $1,000	NA
JT	Limited Partnership, Utica Baseball Club	$1,001 - $15,000	No income	None	NA
JT	Medtronic Common Stock	$1,001 - $15,000	Dividends	$1 - $200	NA
JT	ConMed Common Stock	$1,001 - $15,000	Dividends	$2,501 - $5,000	S
JT	New Economy Fund (IRA)	$15,001 - $50,000	Dividends	$1 - $200	NA
JT	New Economy Fund (IRA)	$15,001 - $50,000	Capital Gains	$1,001 - $2,500	NA
JT	Putnam Capital Appreciation Fund	$15,001 - $50,000	Dividends	$1 - $200	NA

SCHEDULE III -- ASSETS AND "UNEARNED" INCOME

JT	Putnam Capital Appreciation Fund	$15,001 - $50,000	Capital Gains	$201 - $1,000	NA
JT	Putnam Capital Appreciation Fund	$15,001 - $50,000	20% Rate Gain	$201 - $1,000	NA
JT	Putnam Capital Appreciation Fund	$1,001 - $15,000	28% Rate Gain	$201 - $1,000	NA
JT	Putnam International Growth & Income	$50,001 - $100,000	Dividends	$201 - $1,000	NA
JT	Putnam International Growth & Income	$50,001 - $100,000	Capital Gains	$1,001 - $2,500	NA
JT	Putnam International Growth & Income	$50,001 - $100,000	28% Rate Gain	$1 - $200	NA
JT	Putnam Voyager	$15,001 - $50,000	20% Rate Gain	$1 - $200	S
JT	Putnam International Growth	$15,001 - $50,000	No income	None	NA

SCHEDULE IV -- TRANSACTIONS

Report any purchase, sale, or exchange by you, your spouse, or dependent child during the reporting year of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child, or the purchase or sale of your personal residence, unless it is rented out. For further information, see Instructions, pages 20-21.

SP,DC,JT	Asset	Type of Transaction	Date	Amount of Transaction
	Example: Mega Corporation Common Stock	Purchase	10/12/94	$15,001 - $50,000
JT	ConMed CommonStock	Sold	6/18/97	$1,001 - $15,000
JT	Cisco System Inc.	Purchase	6/18/97	$1,001 - $15,000
JT	Putman Mutual Fund/Voyager	Sold	6/18/97	$1,001 - $15,000
JT	Medtronic Inc.	Purchase	11/3/97	$1,001 - $15,000

SCHEDULE VII -- TRAVEL PAYMENTS AND REIMBURSEMENTS

Identify the source and list travel itinerary, dates, and nature of expenses provided for travel and travel-related expenses totalling more than $250 received by you, your spouse, or a dependent child during the reporting period. Indicate whether a family member accompanied the traveler at the sponsor's expense, and the amount of time, if any, that was not at the sponsor's expense. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor.
Exclude: Travel-related expenses provided by federal, state and local governments, or by a foreign government required to be separately reported under the Foreign Gifts and Decorations Act (5 U.S.C. 7342); travel paid for by a Federal political committee; travel provided to a spouse or dependent child that is totally independent of his or her relationship to you. For further information, see Instructions, pages 24-26.

Source	Date(s)	Point of Departure--Destination--Point of Return	Lodging? (Y/N)	Food? (Y/N)	Was a Family Member Included? (Y/N)	Any time not at sponsor's expense
Examples: Chicago Chamber of Commerce	Mar 2	Wash., D.C.-Chicago-Wash., D.C.	N	N	N	N
Mega Corporation	Aug 6-13	Wash., D.C.-Los Angeles-Cleveland	Y	Y	Y	4 Days
The Aspen Institute	2/14/97-2/17/97	Syracuse, NY-Palm Beach, FL-Syracuse, NY	Y	Y	Y	No

SCHEDULE VIII -- POSITIONS

Report all positions, compensated or uncompensated, held during the current calendar year as an officer, director, trustee of an organization, partner, proprietor, representative, employee, or consultant of any corporation, firm, partnership, or other business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States. For further information, see Instructions, page 26

Exclude: Positions held in any religious, social, fraternal, or political entities; positions solely of an honorary nature; and positions listed on Schedule I.

Position	Organization
Limited Partner	Utica Baseball Club

SHERWOOD BOEHLERT
23D DISTRICT, NEW YORK

COMMITTEES
SCIENCE
SUBCOMMITTEE ON BASIC RESEARCH

TRANSPORTATION AND INFRASTRUCTURE
CHAIRMAN, SUBCOMMITTEE ON
WATER RESOURCES AND ENVIRONMENT
SUBCOMMITTEE ON RAILROADS

HOUSE PERMANENT SELECT COMMITTEE
ON INTELLIGENCE

U.S. DELEGATION, N. 4TH ATLANTIC ASSEMBLY
CHAIRMAN, NORTHEAST AGRICULTURE CAUCUS
CHAIRMAN, MINOR LEAGUE BASEBALL CAUCUS

Congress of the United States
House of Representatives
Washington, DC 20515–3223

WASHINGTON OFFICE
2246 RAYBURN HOUSE OFFICE BUILDING
WASHINGTON, DC 20515–3223
(202) 225–3665
Fax (202) 225–1891
E-Mail BOEHLERT@HR.HOUSE.GOV

CENTRAL OFFICE
ALEXANDER PIRNIE FEDERAL BUILDING
10 BROAD STREET
UTICA, NY 13501
(315) 793–8146
Fax (315) 798–4099

TOLL FREE 1–800–235–2525

June 5, 1998

(1) ✓ MC

INSIDE MAIL

99 JUN -8 PM 2:21

The Honorable Robin Carle
Clerk of the House
US House Of Representatives
H154 The Capitol Building
Washington, D.C. 20515

Dear Robin:

In reviewing my filing of my 1997 Financial Disclosure Statement, I find that I listed an asset on Schedule Four, but inadvertently omitted it from Schedule Three.

Here is the asset and the pertinent information to appear on Schedule Three:

Asset	Value	Type of Income	Amount of Income	Transaction
Cisco System Inc.	$1,001-$15,000	none	none	P

Also, on Schedule Four, "Medtronic Inc." should be "Medtronic Common Stock" as it appears on Schedule Three. The transaction for the Medtronic asset should read "P" instead of "NA" (Schedule Three).

I hope you will accept this letter as an amendment to my 1997 Financial Disclosure Statement. Should you have any questions, please contact me or Julie Phillips of my staff at x5-3665.

With warmest regards,

Sincerely,

Sherwood Boehlert
Member of Congress

SB:jp

99 JUN -5 PM 4:20

THIS STATIONERY PRINTED ON PAPER MADE OF RECYCLED FIBERS

98 MAY 14 PM 5:10

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1997

FORM A
For use by Members, officers, and employees

John Andrew Boehner
(Full Name)

1011 Longworth House Office Building
(Mailing Address)

Washington, D.C. 20515

Daytime Telephone
202-225-6205

(9)

MC (Office Use Only)

Filer Status
[X] Member of the U S House of Representatives — State Ohio District 8th
[ ] Officer or Employee — Employing Office.

Report Type
[X] Annual (May 15)
[ ] Amendment
[ ] Termination — Termination Date

A *$200 penalty* shall be assessed against anyone who files more than 30 days late.

PRELIMINARY INFORMATION — ANSWER EACH OF THESE QUESTIONS

I	Did you or your spouse have "earned" income (e.g., salaries or fees) of $200 or more from any source in the reporting period? **If yes, complete and attach Schedule I.**	Yes [X]	No [ ]	VI Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $250 and not otherwise exempt)? **If yes, complete and attach Schedule VI.**	Yes [ ] No [X]
II	Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? **If yes, complete and attach Schedule II.**	Yes [ ]	No [X]	VII Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $250 from one source)? **If yes, complete and attach Schedule VII.**	Yes [X] No [ ]
III	Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? **If yes, complete and attach Schedule III.**	Yes [X]	No [ ]	VIII Did you hold any reportable positions on or before the date of filing in the current calendar year? **If yes, complete and attach Schedule VIII.**	Yes [X] No [ ]
IV	Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset worth more than $1,000 in the reporting period? **If yes, complete and attach Schedule IV.**	Yes [X]	No [ ]	IX Did you have any reportable agreement or arrangement with an outside entity? **If yes, complete and attach Schedule IX.**	Yes [X] No [ ]
V	Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? **If yes, complete and attach Schedule V.**	Yes [X]	No [ ]	**Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.**	

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION — ANSWER EACH OF THESE QUESTIONS

TRUSTS—Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child?	Yes [ ]	No [X]
EXEMPTION—Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption?	Yes [ ]	No [X]

CERTIFICATION — THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended. The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct or its designee. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil penalties and criminal sanctions (*See* 5 U.S.C. app. 4, §104 and 18 U.S.C. §1001).

SIGNATURE OF REPORTING INDIVIDUAL John Andrew Boehner **DATE** (Month/Day/Year) 5/14/98

SCHEDULE I — EARNED INCOME

List the source, type, and amount of earned income from any source (other than the filer's current employment by the U.S. Government) totalling $200 or more during the preceding calendar year. For a spouse, list the source and amount of any honoraria; list only the source for other spouse earned income exceeding $1,000.

	Source	Type	Amount
Examples:	Keene State	Approved Teaching Fee	$6,000
	State of Maryland	Legislative Pension	$9,000
	Civil War Roundtable (Oct. 2nd)	Spouse Speech	$1,000
	Ontario County Board of Education	Spouse Salary	NA
	Magic Photographs, Inc.	Spouse Salary	N/A

For payments to charity in lieu of honoraria, use Schedule II.

SCHEDULE II — PAYMENTS IN LIEU OF HONORARIA MADE TO CHARITY

List the source, activity (i.e., speech, appearance, or article), date, and amount of any payment made by the sponsor of an event to a charitable organization in lieu of an honorarium. A separate confidential list of charities receiving such payments must be filed directly with the Committee on Standards of Official Conduct. An envelope for transmitting the list is included in each Member's filing package.

Source	Activity	Date	Amount
Examples Association of American Associations, Wash., D.C.	Speech	Feb. 2, 1997	$2,000
XYZ Magazine	Article	Aug. 13, 1997	$500
None			

This page may be copied if more space is required.

SCHEDULE III — ASSETS AND "UNEARNED" INCOME

Name: John Andrew Boehner

BLOCK A — Asset and/or Income Source

Identify (a) each asset held for investment or production of income with a fair market value exceeding $1,000 at the end of the reporting year, and (b) any other asset or source of income which generated more than $200 in "unearned" income during the year. For rental property or land, provide an address. Provide full names of any mutual funds. For an IRA or retirement plan that is *self-directed*, list the underlying assets worth more than $1,000. For an IRA or retirement plan that is not selfdirected, name the institution holding the account.

Exclude: Your personal residence(s) (unless there is rental income); any debt owed to you by your spouse, or by your or your spouse's child, parent, or sibling; any deposits totalling $5,000 or less in personal savings accounts; any financial interests in or income derived from U.S. Government retirement programs.

If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC) or is jointly held (JT), in the optional column on the far left.

BLOCK B — Value of Asset

at close of reporting year.
If you use a valuation method other than fair market value, please specify the method used.
If an asset was sold and is included only because it generated income, the value should be "None."

BLOCK C — Type of Income

BLOCK D — Amount of Income

For IRA's and retirement plans that are *not* self-directed, you may write in "NA" for income.

BLOCK E — Transaction

Indicate if asset was purchased (P), sold (S), or exchanged (E) in reporting year.

	BLOCK A		BLOCK B												BLOCK C							BLOCK D										BLOCK E
			A None	B $1 – $1,000	C $1,001 – $15,000	$15,001 – $50,000	E $50,001 – $100,000	F $100,001 – $250,000	G $250,001 – $500,000	H $500,001 – $1,000,000	I $1,000,001 – $5,000,000	J $5,000,001 – $25,000,000	K $25,000,001 – $50,000,000	L Over $50,000,000	DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Type of Income (Specify, For Example, Partnership Income or Farm Income)	I None	II $1 – $200	III $201 – $1,000	IV $1,001 – $2,500	V $2,501 – $5,000	VI $5,001 – $15,000	VII $15,001 – $50,000	VIII $50,001 – $100,000	IX $100,001 – $1,000,000	X $1,000,001 – $5,000,000	XI Over $5,000,000	P, S, E
SP, DC, JT	*Examples:*	SP	Mega Corp. Stock				X								X										X							P
			Simon & Schuster			Indefinite															Royalties												
			1st Bank of Paducah, KY accounts					X									X									X							
	Nucite Sales Inc. - stock									X				X															X			
	Nucite Sales Inc. - pension plan trust								X							N/A							N/A									
	Nucite Sales Inc - profit sharing trust									X						N/A							N/A									
	State of Ohio - public employee retirement system					X										N/A							N/A									
	State of Ohio - deferred compensation plan							X								N/A							N/A									

For additional assets and unearned income, use next page.

SCHEDULE III — ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Name: John Andrew Boehner | Page 5 of 9

SP, DC, JT	BLOCK A: Asset and/or Income Source	BLOCK B: Year-End Value of Asset												BLOCK C: Type of Income							BLOCK D: Amount of Income											BLOCK E: Transaction
		A None	B $1 – $1,000	C $1,001 – $15,000	D $15,001 – $50,000	E $50,001 – $100,000	F $100,001 – $250,000	G $250,001 – $500,000	H $500,001 – $1,000,000	I $1,000,001 – $5,000,000	J $5,000,001 – $25,000,000	K $25,000,001 – $50,000,000	L Over $50,000,000	DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Type of Income (Specify)	I None	II $1 – $200	III $201 – $1,000	IV $1,001 – $2,500	V $2,501 – $5,000	VI $5,001 – $15,000	VII $15,001 – $50,000	VIII $50,001 – $100,000	IX $100,001 – $1,000,000	X $1,000,001 – $5,000,000	XI Over $5,000,000	P, S, E
	Rolling Ridge Associates-Real estate limited partnership - owns Rolling Ridge Aprs., Montana Ave., Cincinnati, Ohio			x												x							x								
JT	First National Bank of Southwestern Ohio-accounts				x											x							x								
JT	Ohio Municipal Cash Trust Mutual Fund				x									x									x								
	Wright Patman Congressional Federal Credit Union-accounts			x												x						x									
JT	Gradison McDonald Opportunity Value Fund - mutual fund					x								x			x									x					P
JT	Gradison McDonald Growth and Income Fund - mutual fund					x								x			x							x								P
JT	American Funds EuroPacific Growth Fund-mutual fund					x								x			x									x						P
JT	American Funds Small Cap. World Fund - mutual fund					x								x			x									x						P
	7908 Cinti.-Dayton Road, Suite 1, West Chester, Ohio - office building						x								x											x						
SP	Farm Property - Pantego, North Carolina (gift to spouse from father in '96)			x																	x											

This page may be copied if more space is required.

SCHEDULE IV — TRANSACTIONS

Name: John Andrew Boehner

Report any purchase, sale, or exchange by you, your spouse, or dependent child during the reporting year of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child, or the purchase or sale of your personal residence, unless it is rented out.		Type of Transaction			Date	Amount of Transaction									
		PURCHASE	SALE	EXCHANGE	(MO/DAY/YR)	B $1,001–$15,000	C $15,001–$50,000	D $50,001–$100,000	E $100,001–$250,000	F $250,001–$500,000	G $500,001–$1,000,000	H $1,000,001–$5,000,000	I $5,000,001–$25,000,000	J $25,000,001–$50,000,000	K Over $50,000,000
SP, DC, JT	**Asset**														
SP	*Example:* Mega Corporation Common Stock	X			10-12-97		X								
JT	Gradison McDonald Growth and Income Fund	x			various		x								
JT	American Funds Small Cap. World Fund	x			various		x								
JT	American Funds EuroPacific Growth Fund	x			various		x								
JT	Gradison McDonald Opportunity Value Fund	x			various		x								

This page may be copied if more space is required.

Name John Andrew Boehner | Page 7 of 9

SCHEDULE V — LIABILITIES

Report liabilities of over $10,000 owed to any one creditor ***at any time*** during the reporting period by you, your spouse, or dependent child. Mark the highest amount owed during the year. **Exclude:** Any mortgage on your personal residence (unless it is rented out); loans secured by automobiles, household furniture, or appliances; and liabilities owed to a spouse, or the child, parent, or sibling of you or your spouse. Report ***revolving charge accounts*** only if the balance at the end of the reporting period exceeded $10,000.

SP, DC, JT	Creditor	Type of Liability	Amount of Liability									
			B $10,001–$15,000	C $15,001–$50,000	D $50,001–$100,000	E $100,001–$250,000	F $250,001–$500,000	G $500,001–$1,000,000	H $1,000,001–$5,000,000	I $5,000,001–$25,000,000	J $25,000,001–$50,000,000	K Over $50,000,000
	Example. First Bank of Wilmington, Delaware	Mortgage on 123 Main St., Dover, Del.				X						
	Banc One - Middletown, Ohio	mortgage on office building		x								

SCHEDULE VI — GIFTS

Report the source, a brief description, and the value of all gifts totalling more than $250 received by you, your spouse, or a dependent child from any source during the year.

Exclude: Gifts from relatives, gifts of personal hospitality of an individual, local meals, and gifts to a spouse or dependent child that are totally independent of his or her relationship to you. Gifts with a value of $100 or less need not be added towards the $250 disclosure threshold.

Note: The gift rule (House Rule 51) prohibits gifts except as specifically provided in the rule.

Source	Description	Value
Example: Mr. Joseph H. Smith, Anytown, Anystate	Silver Platter (determination on personal friendship received from Committee on Standards)	$270
none		

Use additional sheets if more space is required.

SCHEDULE VII —TRAVEL PAYMENTS AND REIMBURSEMENTS

Identify the source and list travel itinerary, dates, and nature of expenses provided for travel and travel-related expenses totalling more than $250 received by you, your spouse, or a dependent child during the reporting period. Indicate whether a family member accompanied the traveler at the sponsor's expense, and the amount of time, if any, that was not at the sponsor's expense. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor.

Exclude: Travel-related expenses provided by federal, state, and local governments, or by a foreign government required to be separately reported under the Foreign Gifts and Decorations Act (5 U.S.C. § 7342); travel paid for by a Federal political committee; travel provided to a spouse or dependent child that is totally independent of his or her relationship to you.

Source	Date(s)	Point of Departure—Destination—Point of Return	Lodging? (Y/N)	Food? (Y/N)	Was a Family Member Included? (Y/N)	Any time not at sponsor's expense
Examples: Chicago Chamber of Commerce	Mar. 2	Wash., D.C.—Chicago—Wash., D.C.	N	N	N	N
Examples: Roycroft Corporation	Aug. 6–13	Wash., D.C.—Los Angeles—Cleveland	Y	Y	Y	4 Days
The Congressional Institute - participant in Republican legislative planning/leadership retreat	Jan. 21-23	Wash., D.C. - Airlie, VA. - Wash., D.C. (provided own transportation)	Y	Y	N	N
Aspen Institute - participant in bipartisan congressional retreat	March 7-9	Wash., D.C. -Hershey, PA.- Wash., D.C. (provided own transportation)	Y	Y	Y	N
CSX Corp. Annual Conference - panelist with bipartisan House and Senate members to discuss legislative issues	May 23-26	Wash., D.C. - White Sulpher Springs, WVA - West Chester Ohio (provided own transportation)	Y	Y	Y	1 day
Corning Corp. - participate in public policy conference	Oct. 31 - Nov. 2	Wash., D.C. - Augusta, GA.	Y	Y	N	N

This page may be copied if more space is required.

SCHEDULE VIII — POSITIONS

Report all positions, compensated or uncompensated, held during the current calendar year as an officer, director, trustee of an organization, partner, proprietor, representative, employee, or consultant of any corporation, firm, partnership, or other business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States.

Exclude: Positions held in any religious, social, fraternal, or political entities; positions solely of an honorary nature; and positions listed on Schedule I.

Position	Name of Organization
Officer - Non-comp.	Nucite Sales, Inc.
Limited Partner	Nucite Sales LP
Limited Partner	Rolling Ridge Associates

SCHEDULE IX — AGREEMENTS

Identify the date, parties to, and general terms of any agreement or arrangement with respect to: future employment; a leave of absence during the period of government service; continuation or deferral of payments by a former or current employer other than the U.S. Government; or continuing participation in an employee welfare or benefit plan maintained by a former employer.

Date	Parties To	Terms of Agreement
	Nucite Sales, Inc. - pension and profit sharing plans	Continued interest - no additional contribution
	State of Ohio - pension and deferred compensation plans	Continued interest - no additional contribution
	Nucite Sales LP	Limited partnership

Use additional sheets if more space is required.

98 MAY 15 AM 11:03

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1997

Form A
For use by Members, officers, and employees

Henry Bonilla
(Full Name)

19 Sanctuary
(Mailing Address)

San Antonio TX 78248

Daytime Telephone: 202-225-4511

MC (Office Use Only) (11)

Filer Status	[X]	Member of the U.S. House of Representatives	State: TX District 23	[ ] Officer or Employee	Employing Office
Report Type	[X]	Annual (May 15)	[ ] Amendment	[ ] Termination	Termination Date

A $200 penalty shall be assessed against anyone who files more th 30 days late.

PRELIMINARY INFORMATION -- ANSWER EACH OF THESE QUESTIONS

I. Did you or your spouse have "earned" income (e.g., salaries or fees) of $200 or more from any source in the reporting period? **If yes, complete and attach Schedule I.** Yes [X] No [ ]

II. Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? **If yes, complete and attach Schedule II.** Yes [ ] No [X]

III. Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? **If yes, complete and attach Schedule III.** Yes [X] No [ ]

IV. Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset worth more than $1,000 in the reporting period? **If yes, complete and attach Schedule IV.** Yes [X] No [ ]

V. Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? **If yes, complete and attach Schedule V.** Yes [ ] No [X]

VI. Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $250 and not otherwise exempt)? **If yes, complete and attach Schedule VI.** Yes [ ] No [X]

VII. Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $250 from one source)? **If yes, complete and attach Schedule VII.** Yes [X] No [ ]

VIII. Did you hold any reportable positions on or before the date of filing in the current calendar year? **If yes, complete and attach Schedule VIII.** Yes [ ] No [X]

IX. Did you have any reportable agreement or arrangement with an outside entity? **If yes, complete and attach Schedule IX.** Yes [ ] No [X]

Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION -- ANSWER EACH OF THESE QUESTIONS

TRUSTS--Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child? (See Instructions, pages 10-11.) Yes [ ] No [X]

EXEMPTION: Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption? (See Instructions, page 11.) Yes [ ] No [X]

CERTIFICATION -- THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended. The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct or its designee. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil penalties and criminal sanctions (See 5 U.S.C. app. 4, 104 and 18 U.S.C. 1001)

SIGNATURE OF REPORTING INDIVIDUAL: Henry Bonilla

DATE (Month/Day/Year): 5-14-98

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Name Henry Bonilla Page of

SCHEDULE I -- EARNED INCOME

List the source, type and amount of earned income from any source (other than the filer's current employment by the U.S. Government) totalling $200 or more during the preceding calendar year. For a spouse, list the source and amount of any honoraria; list only the source for other spouse earned income exceeding $1,000. For further information, see instructions, pages 12-13.

	Source	Type	Amount
	Keene State	Approved Teaching Fee	$10,000
	State of Maryland	Legislative Pension	$9,000
Examples	Civil War Roundtable (Oct. 2nd)	Spouse Speech	$1,000
	Ontario County Board of Education	Spouse Salary	NA
	A H BELO CORPORATION	Spouse Salary	NA

For payments to charity in lieu of honoraria, use Schedule II.

SCHEDULE III -- ASSETS AND "UNEARNED" INCOME

BLOCK A **Asset and/or Income Source** Identify (a) each asset held for investment or production of income with a fair market value exceeding $1,000 at the end of the reporting year, and (b) any other asset or source of income which generated more than $200 in "unearned" income during the year. For rental property or land, provide an address. Provide full names of any mutual funds. For an IRA or retirement plan that is *self-directed*, list the underlying assets worth more than $1,000. For an IRA or retirement plan that is *not* self-directed, name the institution holding the account. **Exclude:** Your personal residence(s) (unless there is rental income), any debt owed to you by your spouse, or by your or your spouse's child, parent, or sibling, any deposits totalling $5,000 or less in personal savings accounts, any financial interests in or income derived from U.S. Government retirement programs. If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC) or is jointly held (JT), in the optional column on the far left. For further information, see instructions, pages 14-20.	BLOCK B **Value of Asset** at close of reporting year If you use a valuation method other than fair market value, please specify the method used. If an asset was sold and is included only because it generated income, the value should be "None."	BLOCK C **Type of Income** If other than one of the listed categories, specify the type of income by writing a brief description in this block.	BLOCK D **Amount of Income** For IRA's and retirement plans that are *not* self-directed, you may write in "NA" for income.	BLOCK E **Transaction** Indicate if asset was purchased(P), sold(S), or exchanged(E) in reporting year.
SP DC *Examples* JT	SP Mega Corp. Stock 123 Main St., Dover, Del 1st Bank of Paducah, KY accounts	$15,001 - $50,000 $250,001 - $500,000 $50,001 - $100,000	Dividends Rent Interest	$201 - $1,000 $1,001 - $2,500 $5,001 - $15,000	P
JT	BOSTON EDISON PV10	$15,001 - $50,000	Dividends	$1,001 - $2,500	NA
JT	CMS ENERGY	$15,001 - $50,000	Dividends	$1,001 - $2,500	NA
JT	CALLAWAY GOLF CO	$15,001 - $50,000	Dividends	$1 - $200	NA
JT	DPL INC	$15,001 - $50,000	Dividends	$1,001 - $2,500	NA
JT	E M C CORPORATION MASS	$15,001 - $50,000	No Income	None	NA
JT	EDISON INTL CALIF	$15,001 - $50,000	Dividends	$1,001 - $2,500	P
JT	GPU INC	$15,001 - $50,000	Dividends	$1,001 - $2,500	NA

SCHEDULE III -- ASSETS AND "UNEARNED" INCOME

JT	HARTE-HANKS COMNCTNS	$50,001 - $100,000	Dividends	$201 - $1,000	NA
JT	HEALTH MGMT ASSOCS INC A	$15,001 - $50,000	No Income	None	NA
JT	J P MORGAN & CO INC	$1,001 - $15,000	Dividends	$201 - $1,000	NA
JT	NEW CENTURY ENERGIES INC	$15,001 - $50,000	Dividends	$1,001 - $2,500	NA
JT	NIAG MOHAWK PWR CORP	$1,001 - $15,000	No Income	None	NA
JT	PINNACLE WEST CAP CORP	$15,001 - $50,000	Dividends	$1,001 - $2,500	NA
JT	TELLABS INC DEL PV 1CT	$15,001 - $50,000	No Income	None	P
JT	THOMAS&BETTS CP TENN NPV	$15,001 - $50,000	Dividends	$201 - $1,000	NA
JT	ML MEDIA PARTNERS LP 86	$15,001 - $50,000	Capital Gains and Dividends	None	NA
DC	BEDFORD PPTY INVS INC	$1,001 - $15,000	Dividends	$201 - $1,000	P
DC	CRESCENT REAL EST EQ TEX	$1,001 - $15,000	Dividends	$201 - $1,000	P
DC	CMS ENERGY CORP	$15,001 - $50,000	Dividends	$201 - $1,000	NA
DC	COUSINS PROPS INC	$1,001 - $15,000	Dividends	$201 - $1,000	P
DC	EQUITY OFFIE FPTYS SBI	$1,001 - $15,000	Dividends	$201 - $1,000	NA
DC	FELCOR SUITE HOTL $0.01	$1,001 - $15,000	Dividends	$201 - $1,000	P
DC	NIAG MOHAWK PWR CORP	$1,001 - $15,000	No Income	None	NA
DC	STARWOOD LODGING TR NEW	$1,001 - $15,000	Dividends	$201 - $1,000	P
DC	CHELSEA GCA REALTY INC	$1,001 - $15,000	Dividends	$201 - $1,000	P
DC	CMS ENERGY CORP	$15,001 - $50,000	Dividends	$201 - $1,000	NA
DC	HARTE-HANKS COMNCTNS	$1,001 - $15,000	Dividends	$1 - $200	NA
DC	NIAG MOHAWK PWR CORP	$1,001 - $15,000	No Income	None	NA
DC	POST PROPERTIES INC	$1,001 - $15,000	Dividends	$201 - $1,000	P

SCHEDULE III -- ASSETS AND "UNEARNED" INCOME

SP	BOSTON EDISON	$15,001 - $50,000	Dividends	$1,001 - $2,500	NA
SP	CMS ENERGY CORP	$15,001 - $50,000	Dividends	$1,001 - $2,500	NA
SP	CALLAWAY GOLF CO	$15,001 - $50,000	Dividends	$1 - $200	NA
SP	DPL INC	$15,001 - $50,000	Dividends	$1,001 - $2,500	NA
SP	E M C CORPORATION MASS	$15,001 - $50,000	No Income	None	NA
SP	EDISON INTL CALIF	$15,001 - $50,000	Dividends	$1,001 - $2,500	P
SP	GPU INC	$15,001 - $50,000	Dividends	$1,001 - $2,500	NA
SP	HARTE-HANKS COMNCTNS	$100,001 - $250,000	Dividends	$201 - $1,000	NA
SP	HEALTH MGMT ASSOCS INC	$50,001 - $100,000	No Income	None	NA
SP	J P MORGAN & CO INC	$1,001 - $15,000	Dividends	$201 - $1,000	NA
SP	NEW CENTURY ENERGIES INC	$15,001 - $50,000	Dividends	$1,001 - $2,500	NA
SP	NIAG MOHAWK PWR CORP	$1,001 - $15,000	No Income	None	NA
SP	PINNACLE WEST CAP CORP	$15,001 - $50,000	Dividends	$1,001 - $2,500	NA
SP	TELLABS INC DEL PV ICT	$15,001 - $50,000	No Income	None	P
SP	THOMAS&BETTS CP TENN	$15,001 - $50,000	Dividends	$201 - $1,000	NA
SP	ML MEDIA PARTNERS LP 86	$15,001 - $50,000	Capital Gains and Dividends	None	NA
JT	USAA FEDERAL SAVINGS BANK	$15,001 - $50,000	Interest	$201 - $1,000	NA
JT	USAA INVESTMENT MANAGEMENT COMPANY	$15,001 - $50,000	Capital Gains and Dividends	$1,001 - $2,500	NA
JT	USAA LIFE AND ANNUITY CO IRA	$15,001 - $50,000	Interest	None	NA

Name Henry Bonilla	Page of

SCHEDULE IV -- TRANSACTIONS

Report any purchase, sale, or exchange by you, your spouse, or dependent child during the reporting year of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child, or the purchase or sale of your personal residence, unless it is rented out. For further information, see Instructions, pages 20-21.

SP, DC, JT	Asset	Type of Transaction	Date	Amount of Transaction
	Example | Mega Corporation Common Stock	Purchase	10/12/94	$15,001 - $50,000
JT	LOT (ELM CREEK UNIT 15, SAN ANTONIO, TX)	Sold	4/17/97	$50,001 - $100,000
SP	CREEDENCE SYSTEMS CORP	Purchase	9/17/97	$15,001 - $50,000
SP	CREEDENCE SYSTEMS CORP	Sold	12/12/97	$1,001 - $15,000
SP	COMPAQ COMPUTER CORP	Sold	12/12/97	$15,001 - $50,000
SP	SAMSONITE CORP	Purchase	7/7/97	$15,001 - $50,000
SP	SAMSONITE CORP	Sold	12/11/97	$1,001 - $15,000
SP	USCS INTERNATIONAL INC	Purchase	7/7/97	$15,001 - $50,000
SP	USCS INTERNATIONAL INC	Sold	12/11/97	$1,001 - $15,000
SP	MICROSOFT CORP	Purchase	12/16/97	$50,001 - $100,000
SP	BOSTON EDISON	Sold	9/17/97	$1,001 - $15,000
SP	CALLAWAY GOLF CO	Sold	9/17/97	$15,001 - $50,000
SP	OWENS ILL INC	Purchase	7/7/97	$15,001 - $50,000
SP	OWENS ILL INC	Sold	9/17/97	$15,001 - $50,000
SP	UNICOM CORP	Sold	9/17/97	$1,001 - $15,000
SP	BARNES & NOBLE INC	Purchase	9/17/97	$15,001 - $50,000
SP	BRYLANE INC	Purchase	9/18/97	$1,001 - $15,000
SP	SAFESKIN CORP	Purchase	9/17/97	$1,001 - $15,000

SCHEDULE IV -- TRANSACTIONS

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SP,DC,JT	Asset	Type of Transaction	Date	Amount of Transaction
Example	*Mega Corporation Common Stock*	Purchase	10/12/04	$15,001 - $50,000
SP	TELLABS INC DEL PV 1CT	Purchase	9/17/97	$15,001 - $50,000
SP	TOTAL RENAL CARE HLDGS	Purchase	9/17/97	$1,001 - $15,000
SP	ALTERA CORP	Purchase	7/7/97	$15,001 - $50,000
SP	ALTERA CORP	Sold	7/31/97	$15,001 - $50,000
SP	AETNA INC FV $0.01 CONN	Sold	7/7/97	$1,001 - $15,000
SP	AMERITECH CORP NEW COM	Sold	7/17/97	$1,001 - $15,000
SP	AETNA INCORPORATED	Sold	7/7/97	$1,001 - $15,000
SP	DPL INC	Sold	7/7/97	$1,001 - $15,000
SP	FEDRTD DPT STORS DEL NEW	Sold	7/7/97	$15,001 - $50,000
SP	NEW AMER HIGH INCOME FD	Sold	7/7/97	$1,001 - $15,000
SP	GPU INC	Sold	7/7/97	$1,001 - $15,000
SP	HK ELEC HLDGS SPNSD ADR	Sold	7/7/97	$15,001 - $50,000
SP	HORIZON/CMS HLTHCR CORP	Sold	7/7/97	$1,001 - $15,000
SP	MOSSIMO INC	Sold	7/7/97	$1,001 - $15,000
SP	NIPSCO INDUSTRIES INC	Sold	7/7/97	$1,001 - $15,000
SP	SAFEWAY INC	Sold	7/7/97	$15,001 - $50,000
SP	VISHAY INTERTECHNLGY	Sold	7/7/97	$15,001 - $50,000
SP	BORDERS GROUP INC	Purchase	7/7/97	$15,001 - $50,000

SCHEDULE IV -- TRANSACTIONS

Report any purchase, sale, or exchange by you, your spouse, or dependent child during the reporting year of any real property, stocks, bonds, commodities futures or other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse or your dependent child, or the purchase or sale of your personal residence, unless it is rented out. For further information, see Instructions, pages 20-21.

SP,DC,JT	Asset	Type of Transaction	Date	Amount of Transaction
	Example: Mega Corporation Common Stock	Purchase	10/12/04	$15,001 - $50,000
SP	COCA COLA COM	Purchase	7/8/97	$1 001 - $15 000
SP	EPA MEDICAL MGMT INC	Purchase	7/7/97	$15 001 - $50 000
SP	KEMET CORP	Purchase	7/8/97	$15 001 - $50 000
SP	SCI SYS INC	Purchase	7/7/97	$15 001 - $50 000
SP	TECO ENERGY INC	Purchase	7/17/97	$1 001 - $15 000
DC	CHELSEA GCA REALTY INC	Purchase	7/7/97	$1 001 - $15 000
DC	POST PROPERTIES INC	Purchase	7/7/97	$1 001 - $15 000
DC	DPL INC	Sold	7/7/97	$1 001 - $15 000
DC	FPL GROUP INC	Sold	7/7/97	$1 001 - $15 000
DC	PECO ENERGY	Sold	7/7/97	$1 001 - $15 000
DC	BEDFORD PPTY INVS INC	Purchase	7/7/97	$1 001 - $15 000
DC	CRESCENT REAL EST EQ TEX	Purchase	7/7/97	$1 001 - $15 000
DC	CMS ENERGY CORP	Purchase	7/19/97	$1 001 - $15 000
DC	COUSINS PROPS INS	Purchase	7/7/97	$1 001 - $15 000
DC	FELCOR SUITE HOTLS	Purchase	7/7/97	$1 001 - $15 000
DC	STARWOOD LODGING TR	Purchase	7/7/97	$1 001 - $15 000
DC	BEACON PROPERTIES CORP	Purchase	7/7/97	$1 001 - $15 000

SCHEDULE IV -- TRANSACTIONS

Report any purchase, sale, or exchange by you, your spouse, or dependent child during the reporting year of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child or the purchase or sale of your personal residence, unless it is rented out. For further information, see Instructions, pages 20-21.

SP,DC,JT	Asset	Type of Transaction	Date	Amount of Transaction
	Example Mega Corporation Common Stock	Purchase	10/12/04	$15,001 - $50,000
DC	ALLTELL CORP DEL	Sold	7/7/97	$1,001 - $15,000
DC	AMERITECH CORP NEW	Sold	7/17/97	$1,001 - $15,000
DC	CINERGY CORP COM	Sold	7/7/97	$1,001 - $15,000
DC	ENTERGY CORP NEW	Sold	7/7/97	$1,001 - $15,000
DC	GPU INC COM	Sold	7/7/97	$15,001 - $50,000
DC	NIPSCO INDUSTRIES INC	Sold	7/7/97	$1,001 - $15,000
DC	STONE CONTAINER CORP DEL	Sold	7/7/97	$1,001 - $15,000
DC	UNICOM CORP	Sold	7/7/97	$1,001 - $15,000
JT	APPLIED MATERIAL INC	Purchase	7/7/97	$15,001 - $50,000
JT	APPLIED MATERIAL INC	Sold	12/11/97	$1,001 - $15,000
JT	KENT ELECTRONICS CORP	Purchase	7/7/97	$15,001 - $50,000
JT	KENT ELECTRONICS CORP	Sold	12/11/97	$1,001 - $15,000
JT	USCS INTERNATIONAL INC	Sold	12/11/97	$1,001 - $15,000
JT	EDISON INTL CALIF	Purchase	1/17/97	$15,001 - $50,000
JT	TELLABS INC DEL PV 1CT	Purchase	7/7/97	$15,001 - $50,000
JT	USCS INTERNATIONAL INC	Purchase	6/26/97	$1,001 - $15,000
JT	LIVING CTRS AMER INCCOM	Sold	10/23/97	$1,001 - $15,000
JT	BOSTON CHICKEN INC	Sold	6/26/97	$1,001 - $15,000

Name Henry Bonilla	Page of

SCHEDULE IV -- TRANSACTIONS

Report any purchase, sale, or exchange by you, your spouse, or dependent child during the reporting year of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child, or the purchase or sale of your personal residence, unless it is rented out. For further information, see Instructions, pages 20-21.

SP,DC,JT	Asset	Type of Transaction	Date	Amount of Transaction
	Example Mega Corporation Common Stock	Purchase	10/12/94	$15,001 - $50,000
JT	DUFF & PHELPS CR RATING	Sold	7/7/97	$1,001 - $15,000
JT	MEDPARTNERS INC NEW	Sold	7/7/97	$1,001 - $15,000
JT	MERCURY FINANCE CO	Sold	7/7/97	$1,001 - $15,000
JT	PHOENIX DUFF&PHELPS CORP	Sold	7/7/97	$1,001 - $15,000
JT	PHOENIX DUFF & PHELPS	Sold	7/7/97	$1,001 - $15,000
JT	SAFEWAY INC	Sold	7/7/97	$15,001 - $50,000
JT	STONE CONTAINER CORP	Sold	7/7/97	$1,001 - $15,000
JT	AMPHENOL CORP CL A	Sold	3/24/97	$1,001 - $15,000
JT	NTL PWR PLC F I SPN ADR	Sold	1/17/97	$15,001 - $50,000

SCHEDULE VII -- TRAVEL PAYMENTS AND REIMBURSEMENTS

Identify the source and list travel itinerary, dates, and nature of expenses provided for travel and travel-related expenses totalling more than $250 received by you, your spouse, or a dependent child during the reporting period. Indicate whether a family member accompanied the traveler at the sponsor's expense, and the amount of time, if any, that was not at the sponsor's expense. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor.
Exclude: Travel-related expenses provided by federal, state and local governments, or by a foreign government required to be separately reported under the Foreign Gifts and Decorations Act (5 U.S.C. 7342), travel paid for by a Federal political committee, travel provided to a spouse or dependent child that is totally independent of his or her relationship to you. For further information, see instructions, pages 24-26.

Source	Date(s)	Point of Departure--Destination--Point of Return	Lodging? (Y/N)	Food? (Y/N)	Was a Family Member Included? (Y/N)	Any time not at sponsor's expen
Examples: Chicago Chamber of Commerce	Mar 2	Wash., D.C.-Chicago-Wash., D.C.	N	N	N	N
Mega Corporation	Aug 6-13	Wash., D.C.-Los Angeles-Cleveland	Y	Y	Y	4 Days
NATIONAL MEAT ASSOC	Aug. 21-23	Wash. D.C.-Park City, Utah-Wash. D.C.	Y	Y	Y	N

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1997

FORM A
For use by Members, officers and employees

98 MAY 15 PM 12:06

(6)

MC HAND DELIVERED
(Office Use Only)

David Edward Bonior
(Full Name)

23 - Dickinson - Unit E
(Mailing Address)

Mount Clemens, Michigan 48043

Daytime Telephone
202-225-3130

Filer Status: [X] Member of the U.S. House of Representatives — State Michigan, District 10 — [ ] Officer or Employee — Employing Office

Report Type: [X] Annual (May 15) — [ ] Amendment — [ ] Termination — Termination Date

A *$200 penalty* shall be assessed against anyone who files more than 30 days late.

PRELIMINARY INFORMATION — ANSWER EACH OF THESE QUESTIONS

I Did you or your spouse have "earned" income (e.g., salaries or fees) of $200 or more from any source in the reporting period?
If yes, complete and attach Schedule I. Yes [ ] No [X]

II Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period?
If yes, complete and attach Schedule II. Yes [X] No [ ]

III Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period?
If yes, complete and attach Schedule III. Yes [X] No [ ]

IV Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset worth more than $1,000 in the reporting period?
If yes, complete and attach Schedule IV. Yes [X] No [ ]

V Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period?
If yes, complete and attach Schedule V. Yes [ ] No [X]

VI Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $250 and not otherwise exempt)?
If yes, complete and attach Schedule VI. Yes [ ] No [X]

VII Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $250 from one source)?
If yes, complete and attach Schedule VII. Yes [X] No [ ]

VIII Did you hold any reportable positions on or before the date of filing in the current calendar year?
If yes, complete and attach Schedule VIII. Yes [X] No [ ]

IX Did you have any reportable agreement or arrangement with an outside entity?
If yes, complete and attach Schedule IX Yes [ ] No [X]

Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION — ANSWER EACH OF THESE QUESTIONS

TRUSTS—Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child? Yes [ ] No [X]

EXEMPTION—Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption? Yes [ ] No [X]

CERTIFICATION — THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended. The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct or its designee. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil penalties and criminal sanctions (*See* 5 U.S.C. app. 4, §104 and 18 U.S.C. §1001)

SIGNATURE OF REPORTING INDIVIDUAL David E. Bonior

DATE (Month/Day/Year) May 15, 1998

SCHEDULE II — PAYMENTS IN LIEU OF HONORARIA MADE TO CHARITY

List the source, activity (i.e., speech, appearance, or article), date, and amount of any payment made by the sponsor of an event to a charitable organization in lieu of an honorarium. A separate confidential list of charities receiving such payments must be filed directly with the Committee on Standards of Official Conduct. An envelope for transmitting the list is included in each Member's filing package

Source	Activity	Date	Amount
Examples Association of American Associations, Wash., D.C.	Speech	Feb. 2, 1997	$2,000
XYZ Magazine	Article	Aug. 13, 1997	$500
The Connell Company	Speech	April 7, 1997	$2,000
Taub Urban Research Center at New York University	Speech	April 8, 1997	$2,000

This page may be copied if more space is required.

Name David Edward Bonior | Page 3 of 6

SCHEDULE III — ASSETS AND "UNEARNED" INCOME

BLOCK A — Asset and/or Income Source

Identify (a) each asset held for investment or production of income with a fair market value exceeding $1,000 at the end of the reporting year, and (b) any other asset or source of income which generated more than $200 in "unearned" income during the year. For rental property or land, provide an address. Provide full names of any mutual funds. For an IRA or retirement plan that is *self-directed*, list the underlying assets worth more than $1,000. For an IRA or retirement plan that is not self-directed, name the institution holding the account.

Exclude: Your personal residence(s) (unless there is rental income), any debt owed to you by your spouse, or by your or your spouse's child, parent, or sibling, any deposits totalling $5,000 or less in personal savings accounts, any financial interests in or income derived from U.S. Government retirement programs.

If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC) or is jointly held (JT), in the optional column on the far left.

SP	*Examples*	SP	Mega Corp. Stock
DC			Simon & Schuster
JT			1st Bank of Paducah, KY accounts

BLOCK B — Value of Asset

at close of reporting year. If you use a valuation method other than fair market value, please specify the method used. If an asset was sold and is included only because it generated income, the value should be "None."

BLOCK C — Type of Income

BLOCK D — Amount of Income

For IRA's and retirement plans that are *not* self-directed, you may write in "NA" for income.

BLOCK E — Transaction

Indicate if asset was purchased (P), sold (S), or exchanged (E) in reporting year.

	Block A	B: A None	B: B $1 – $1,000	B: C $1,001 – $15,000	B: D $15,001 – $50,000	B: E $50,001 – $100,000	B: F $100,001 – $250,000	B: G $250,001 – $500,000	B: H $500,001 – $1,000,000	B: I $1,000,001 – $5,000,000	B: J $5,000,001 – $25,000,000	B: K $25,000,001 – $50,000,000	B: L Over $50,000,000	C: Dividends	C: Rent	C: Interest	C: Capital Gains	C: Excepted Trust	C: Qualified Blind Trust	C: Other Type of Income (Specify. For Example: Partnership Income or Farm Income)	D: I None	D: II $1 – $200	D: III $201 – $1,000	D: IV $1,001 – $2,500	D: V $2,501 – $5,000	D: VI $5,001 – $15,000	D: VII $15,001 – $50,000	D: VIII $50,001 – $100,000	D: IX $100,001 – $1,000,000	D: X $1,000,001 – $5,000,000	D: XI Over $5,000,000	E: Transaction P, S, E
	Wright Patman Cong.FCU			X												X						X									
SP	Wright Patman Cong.FCU			X												X						X									
SP	Wright Patman Cong.FCU				X									N/A - IRA								N/A - IRA									
SP	Evergreen Funds Small Co. Growth Fund					X										X										X					

For additional assets and unearned income, use next page.

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SCHEDULE IV — TRANSACTIONS

Name David Edward Bonior | Page 4 of 6

Report any purchase, sale, or exchange by you, your spouse, or dependent child during the reporting year of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child, or the purchase or sale of your personal residence, unless it is rented out.

SP, DC, JT	Asset	Type of Transaction: PURCHASE	SALE	EXCHANGE	Date (MO/DAY/YR)	Amount of Transaction: B ($1,001–$15,000)	C ($15,001–$50,000)	D ($50,001–$100,000)	E ($100,001–$250,000)	F ($250,001–$500,000)	G ($500,001–$1,000,000)	H ($1,000,001–$5,000,000)	I ($5,000,001–$25,000,000)	J ($25,000,001–$50,000,000)	K (Over $50,000,000)
SP	*Example* Mega Corporation Common Stock	x			10-12-97		x								
SP	Evergreen Funds Small Co.Growth Fund (S-4)(formerly Keystone)Reinvest Capital gains	x			7/3/97	x									
		x			11/21/97	x									

This page may be copied if more space is required.

SCHEDULE VII —TRAVEL PAYMENTS AND REIMBURSEMENTS

Identify the source and list travel itinerary, dates, and nature of expenses provided for travel and travel-related expenses totalling more than $250 received by you, your spouse, or a dependent child during the reporting period. Indicate whether a family member accompanied the traveler at the sponsor's expense, and the amount of time, if any, that was not at the sponsor's expense. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor.

Exclude: Travel-related expenses provided by federal, state, and local governments, or by a foreign government required to be separately reported under the Foreign Gifts and Decorations Act (5 U.S.C. § 7342), travel paid for by a Federal political committee; travel provided to a spouse or dependent child that is totally independent of his or her relationship to you.

Source	Date(s)	Point of Departure—Destination—Point of Return	Lodging? (Y/N)	Food? (Y/N)	Was a Family Member Included? (Y/N)	Any time not at sponsor's expense
Examples						
Chicago Chamber of Commerce	Mar 2	Wash., D.C.—Chicago—Wash., D.C.	N	N	N	N
Roycroft Corporation	Aug. 6–13	Wash., D.C.—Los Angeles—Cleveland	Y	Y	Y	4 Days
Maritime Trades Dept. - AFL-CIO	Feb.13-15	Wash.,D.C.-Los Angeles	Y	Y	Y	N
Ironworkers	Feb.16-18	Los Angeles-Miami	Y	Y	Y	Y
The Aspen Institute *See Footnote	Mar.7-8	Wash.,D.C.-Hershey,Pa.-Wash.,D.C.	Y	Y	Y	N
The Aspen Institute	Mar.31-Apr. 6	Wash.,D.C.-Lanai,Hawaii Wash.,D.C.	Y	Y	Y	N
The Connell Company	Apr.7-8	Wash.,D.C.-Newark, NJ-Wash.,D.C.	N	N	N	Y
United Steelworkers of America	May 5-6	Wash.,D.C.-Green Bay,WI Wash.,D.C.	Y	Y	Y	N
Alaska Wilderness League	June 28-July 3	Wash.,D.C.-Fairbanks/Anchorage,AK-Wash.,D.C.	Y	Y	Y	N
Sheet Metal Workers International Union	July 18-2	Wash.,D.C.-San Francisco,-CA-Wash.D.C.	Y	Y	Y	N
American Sugar Alliance	Aug. 1-5	Wash.,D.C.-Big Sky, MT-Wash.,D.C.	Y	Y	Y	N
National Council of Sr.Citz	Sept. 8	Detroit-Cincinnati,OH-Wash., D.C.	N	N	Y	N
Seafarers International Un.	Sept. 19	Wash.,D.C.-Pittsburgh, Pa.,-Wash., D. C.	N	N	N	N
AFL-CIO	Oct.24-25	Wash.,D.C.-Juarez,MX. Wash.,D.C.	Y	Y	N	N

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* Footnote - Drove own vehicle to and from Hershey, Pa.

SCHEDULE VIII — POSITIONS

Report all positions, compensated or uncompensated, held during the current calendar year as an officer, director, trustee of an organization, partner, proprietor, representative, employee, or consultant of any corporation, firm, partnership, or other business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States.

Exclude: Positions held in any religious, social, fraternal, or political entities, positions solely of an honorary nature; and positions listed on Schedule I.

Position	Name of Organization
Trustee	Gallaudet University
Advisory Board Member	Flagler College - Center on Government and Public Policy

SCHEDULE IX — AGREEMENTS

Identify the date, parties to, and general terms of any agreement or arrangement with respect to: future employment, a leave of absence during the period of government service, continuation or deferral of payments by a former or current employer other than the U.S. Government; or continuing participation in an employee welfare or benefit plan maintained by a former employer.

Date	Parties To	Terms of Agreement

GPO: 1998 46-260 (mac)

Use additional sheets if more space is required.

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1997

FORM A
For use by Members, officers, and employees

RECEIVED
98 JUN -3 AM 8 26
INSIDE MAIL
(Office Use Only)

Mary Bono
(Full Name)
301 W. El Camino Way
(Mailing Address)
Palm Springs, CA 92264
Daytime Telephone 202-225-5330

Filer Status: [X] Member of the U.S. House of Representatives — State CA District 44 — [ ] Officer or Employee — Employing Office

Report Type: [X] Annual (May 15) — [ ] Amendment — [ ] Termination — Termination Date

A *$200 penalty* shall be assessed against anyone who files more than 30 days late.

PRELIMINARY INFORMATION — ANSWER EACH OF THESE QUESTIONS

I. Did you or your spouse have "earned" income (e.g., salaries or fees) of $200 or more from any source in the reporting period? **If yes, complete and attach Schedule I.** — Yes [ ] No [X]

II. Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? **If yes, complete and attach Schedule II.** — Yes [ ] No [X]

III. Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? **If yes, complete and attach Schedule III.** — Yes [X] No [ ]

IV. Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset worth more than $1,000 in the reporting period? **If yes, complete and attach Schedule IV.** — Yes [ ] No [ ]

V. Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? **If yes, complete and attach Schedule V.** — Yes [ ] No [X]

VI. Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $250 and not otherwise exempt)? **If yes, complete and attach Schedule VI.** — Yes [ ] No [X]

VII. Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $250 from one source)? **If yes, complete and attach Schedule VII.** — Yes [X] No [ ]

VIII. Did you hold any reportable positions on or before the date of filing in the current calendar year? **If yes, complete and attach Schedule VIII.** — Yes [ ] No [X]

IX. Did you have any reportable agreement or arrangement with an outside entity? **If yes, complete and attach Schedule IX.** — Yes [ ] No [X]

Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION — ANSWER EACH OF THESE QUESTIONS

TRUSTS—Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child? — Yes [ ] No [X]

EXEMPTION—Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption? — Yes [ ] No [X]

CERTIFICATION — THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended. The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct or its designee. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil penalties and criminal sanctions (*See* 5 U.S.C. app. 4, §104 and 18 U.S.C. §1001).

SIGNATURE OF REPORTING INDIVIDUAL: Mary Bono

DATE (Month/Day/Year): 5/30/98

SCHEDULE III — ASSETS AND "UNEARNED" INCOME

Name MARY BONO | Page 1 of 4

BLOCK A — Asset and/or Income Source

Identify (a) each asset held for investment or production of income with a fair market value exceeding $1,000 at the end of the reporting year, and (b) any other asset or source of income which generated more than $200 in "unearned" income during the year. For rental property or land, provide an address. Provide full names of any mutual funds. For an IRA or retirement plan that is *self-directed*, list the underlying assets worth more than $1,000. For an IRA or retirement plan that is not selfdirected, name the institution holding the account.

Exclude: Your personal residence(s) (unless there is rental income), any debt owed to you by your spouse, or by your or your spouse's child, parent, or sibling, any deposits totalling $5,000 or less in personal savings accounts, any financial interests in or income derived from U.S. Government retirement programs.

If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC) or is jointly held (JT), in the optional column on the far left.

BLOCK B — Value of Asset

at close of reporting year
If you use a valuation method other than fair market value, please specify the method used. If an asset was sold and is included only because it generated income, the value should be "None."

BLOCK C — Type of Income

BLOCK D — Amount of Income

For IRA's and retirement plans that are *not* self-directed, you may write in "NA" for income

BLOCK E — Transaction

Indicate if asset was purchased (P), sold (S), or exchanged (E) in reporting year

	BLOCK A	B: None	A: $1 – $1,000	B: $1,001 – $15,000	C: $15,001 – $50,000	E: $50,001 – $100,000	F: $100,001 – $250,000	G: $250,001 – $500,000	H: $500,001 – $1,000,000	I: $1,000,001 – $5,000,000	J: $5,000,001 – $25,000,000	K: $25,000,001 – $50,000,000	L: Over $50,000,000	C: DIVIDENDS	C: ~~RENT~~ Residuals	C: INTEREST	C: CAPITAL GAINS	C: ~~TRUST~~ Royalties	C: QUALIFIED BLIND TRUST	C: Other Type of Income (Specify. For Example: Partnership Income or Farm Income)	D: I None	D: II $1 – $200	D: III $201 – $1,000	D: IV $1,001 – $2,500	D: V $2,501 – $5,000	D: VI $5,001 – $15,000	D: VII $15,001 – $50,000	D: VIII $50,001 – $100,000	D: IX $100,001 – $1,000,000	D: X $1,000,001 – $5,000,000	D: XI Over $5,000,000	E: Transaction
SP.																																
DC.	*Examples*			Indefinite		X								X						Royalties				X					X		P
JT							X								X										X						
JT	Union Bank of CA				X											X								X							
JT	Congressional Credit Union				X											X						X									
SP	ORION Pictures		Indefinite														X						X								
SP	Paul Brownstein Prod.		Indefinite												X										X						
SP	Dick Clark Prod.		Indefinite												X								X								
SP	EP Talent Services		Indefinite												X									X							

For additional assets and unearned income, use next page.

SCHEDULE III — ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Name

Page 2 of 4

SP. DC. JT	BLOCK A Asset and/or Income Source	BLOCK B Year-End Value of Asset											BLOCK C Type of Income						BLOCK D Amount of Income											BLOCK E Transaction
		A None	B $1 – $1,000	C $1,001 – $15,000	D $15,001 – $50,000	E $50,001 – $100,000	F $100,001 – $250,000	G $250,001 – $500,000	H $500,001 – $1,000,000	I $1,000,001 – $5,000,000	J $5,000,001 – $25,000,000	K $25,000,001 – $50,000,000	L Over $50,000,000	DIVIDENDS	~~RENT~~ Residuals	INTEREST	CAPITAL GAINS	~~EXCEPTED TRUST~~ Royalties	QUALIFIED BLIND TRUST	Other Type of Income (Specify)	i None	II $1 – $200	III $201 – $1,000	IV $1,001 – $2,500	V $2,501 – $5,000	VI $5,001 – $15,000	VII $15,001 – $50,000	VIII $50,001 – $100,000	IX $100,001 – $1,000,000	X $1,000,001 – $5,000,000	XI Over $5,000,000	P. S. E
SP	Walt Disney Pictures	Indefinite													X								X						
SP	George Schlatter	Indefinite													X								X						
SP	BBC	Indefinite													X							X							
SP	SPE Corp. Services	Indefinite													X						X								
SP	Paramount Pictures	Indefinite													X						X								
SP	Cast & Crew	Indefinite													X						X								
SP	TuRand Payroll	Indefinite													X						X								
SP	Atlantic Recording Corp	Indefinite															X								X				
SP	Broadcast Music Inc	Indefinite															X										X		
SP	EMI Entertainment World	Indefinite															X								X				
SP	Harry Fox Agency Inc.	Indefinite															X							X					
SP	MCA, Inc.	Indefinite															X								X				
SP	Warner/Chappell Music	Indefinite															X										X		
JT	Merrill Lynch - CMA					X								X											X				
DC	U.S. Treasury Strips				X											X					Paid on Maturity								
DC	First Nationwide Bank CD				X											X					Paid on maturity								
DC	Cats Series M Bond			X												X					Paid on maturity								
DC	Cats Series R Bond				X											X					Paid on maturity								
DC	Equity Inc - S&P 500				X									X								X							
DC	Los Angeles County Bonds			X												X						X							

This page may be copied if more space is required.

Name	Page 3 of 4

SCHEDULE VII —TRAVEL PAYMENTS AND REIMBURSEMENTS

Identify the source and list travel itinerary, dates, and nature of expenses provided for travel and travel-related expenses totalling more than $250 received by you, your spouse, or a dependent child during the reporting period. Indicate whether a family member accompanied the traveler at the sponsor's expense, and the amount of time, if any, that was not at the sponsor's expense. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor.

Exclude: Travel-related expenses provided by federal, state, and local governments, or by a foreign government required to be separately reported under the Foreign Gifts and Decorations Act (5 U.S.C. § 7342); travel paid for by a Federal political committee; travel provided to a spouse or dependent child that is totally independent of his or her relationship to you.

Source	Date(s)	Point of Departure—Destination—Point of Return	Lodging? (Y/N)	Food? (Y/N)	Was a Family Member Included? (Y/N)	Any time not at sponsor's expense
Examples: Chicago Chamber of Commerce	Mar. 2	Wash , D.C —Chicago—Wash., D.C.	N	N	N	N
Roycroft Corporation	Aug. 6–13	Wash., D.C —Los Angeles—Cleveland	Y	Y	Y	4 Days
27th Annual St. Joseph Parade Italian American Community New Orleans, LA	3/15 - 16	DCA - MSY - DCA	Y	Y	Y	N

This page may be copied if more space is required.

SCHEDULE VIII — POSITIONS

Report all positions, compensated or uncompensated, held during the current calendar year as an officer, director, trustee of an organization, partner, proprietor, representative, employee, or consultant of any corporation, firm, partnership, or other business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States.

Exclude: Positions held in any religious, social, fraternal, or political entities; positions solely of an honorary nature; and positions listed on Schedule I.

Position	Name of Organization
Vice President	Sonny Bono, Inc.

SCHEDULE IX — AGREEMENTS

Identify the date, parties to, and general terms of any agreement or arrangement with respect to: future employment; a leave of absence during the period of government service; continuation or deferral of payments by a former or current employer other than the U.S. Government; or continuing participation in an employee welfare or benefit plan maintained by a former employer.

Date	Parties To	Terms of Agreement

Use additional sheets if more space is required.

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1997

FORM A
For use by Members, officers, and employees

98 MAY 14 PM 4:31

Robert A. Borski
(Full Name)

2267 Rayburn HOB, Washington, DC 20515
(Mailing Address)

(202) 225-8251
Daytime Telephone

(Office Use Only) (3)

Filer Status	[X] Member of the U S House of Representatives	State PA District 3	[ ] Officer or Employee	Employing Office
Report Type	[X] Annual (May 15)	[ ] Amendment	[ ] Termination	Termination Date

A *$200 penalty* shall be assessed against anyone who files more than 30 days late.

PRELIMINARY INFORMATION — ANSWER EACH OF THESE QUESTIONS

I. Did you or your spouse have "earned" income (e g , salaries or fees) of $200 or more from any source in the reporting period? **If yes, complete and attach Schedule I.**	Yes [ ]	No [X]	VI. Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i e , aggregating more than $250 and not otherwise exempt)? **If yes, complete and attach Schedule VI.**	Yes [ ]	No [X]
II. Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? **If yes, complete and attach Schedule II.**	Yes [X]	No [ ]	VII. Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $250 from one source)? **If yes, complete and attach Schedule VII.**	Yes [X]	No [ ]
III. Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? **If yes, complete and attach Schedule III.**	Yes [ ]	No [X]	VIII. Did you hold any reportable positions on or before the date of filing in the current calendar year? **If yes, complete and attach Schedule VIII.**	Yes [ ]	No [X]
IV. Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset worth more than $1,000 in the reporting period? **If yes, complete and attach Schedule IV.**	Yes [ ]	No [X]	IX. Did you have any reportable agreement or arrangement with an outside entity? **If yes, complete and attach Schedule IX.**	Yes [ ]	No [X]
V. Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? **If yes, complete and attach Schedule V.**	Yes [ ]	No [X]	**Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.**		

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION — ANSWER EACH OF THESE QUESTIONS

TRUSTS—Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child?	Yes [ ]	No [X]
EXEMPTION—Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption?	Yes [ ]	No [X]

CERTIFICATION — THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended. The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct or its designee. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil penalties and criminal sanctions (*See* 5 U S C. app. 4, §104 and 18 U S C. §1001)

SIGNATURE OF REPORTING INDIVIDUAL Robert A. Borski

DATE (Month/Day/Year) 5/14/98

SCHEDULE II — PAYMENTS IN LIEU OF HONORARIA MADE TO CHARITY

List the source, activity (i.e., speech, appearance, or article), date, and amount of any payment made by the sponsor of an event to a charitable organization in lieu of an honorarium. A separate confidential list of charities receiving such payments must be filed directly with the Committee on Standards of Official Conduct. An envelope for transmitting the list is included in each Member's filing package.

	Source	Activity	Date	Amount
Examples.	Association of American Associations, Wash., D.C.	Speech	Feb 2, 1997	$2,000
	XYZ Magazine	Article	Aug 13, 1997	$500
	Preston Gates Ellis & Rouvelas Meeds	Speech	Feb. 12, 1997	$1,000

This page may be copied if more space is required.

SCHEDULE VII —TRAVEL PAYMENTS AND REIMBURSEMENTS

Identify the source and list travel itinerary, dates, and nature of expenses provided for travel and travel-related expenses totalling more than $250 received by you, your spouse, or a dependent child during the reporting period. Indicate whether a family member accompanied the traveler at the sponsor's expense, and the amount of time, if any, that was not at the sponsor's expense. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor.

Exclude: Travel-related expenses provided by federal, state, and local governments, or by a foreign government required to be separately reported under the Foreign Gifts and Decorations Act (5 U.S.C. § 7342); travel paid for by a Federal political committee; travel provided to a spouse or dependent child that is totally independent of his or her relationship to you.

Source	Date(s)	Point of Departure—Destination—Point of Return	Lodging? (Y/N)	Food? (Y/N)	Was a Family Member Included? (Y/N)	Any time not at sponsor's expense
Examples: Chicago Chamber of Commerce	Mar. 2	Wash., D.C.—Chicago—Wash., D.C.	N	N	N	N
Roycroft Corporation	Aug. 6–13	Wash., D.C.—Los Angeles—Cleveland	Y	Y	Y	4 Days
Aspen Institute	3/7-3/9	Wash, DC - Hershey,PA - Wash, DC	Y	Y	Y	N
Florida Overland Express	6/29-7/7	Phil, PA - Paris, Fr - Phil, PA	Y	Y	Y	5 days

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UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1997

FORM A
For use by Members, officers, and employees

98 MAY 15 PM 2:55

Leonard L. Boswell
(Full Name)

RR1 Box 130
(Mailing Address)

Davis City, IA 50065

202 - 225 3806
Daytime Telephone

HAND DELIVERED
(Office Use Only)

Filer Status	[X] Member of the U S House of Representatives	State IA District 3	[ ] Officer or Employee	Employing Office
Report Type	[X] Annual (May 15)	[ ] Amendment	[ ] Termination	Termination Date

A *$200 penalty* shall be assessed against anyone who files more than 30 days late.

PRELIMINARY INFORMATION — ANSWER EACH OF THESE QUESTIONS

I. Did you or your spouse have "earned" income (e.g., salaries or fees) of $200 or more from any source in the reporting period? **If yes, complete and attach Schedule I.**	Yes [X]	No [ ]	VI. Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $250 and not otherwise exempt)? **If yes, complete and attach Schedule VI.**	Yes [ ]	No [X]
II. Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? **If yes, complete and attach Schedule II.**	Yes [ ]	No [X]	VII. Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $250 from one source)? **If yes, complete and attach Schedule VII.**	Yes [X]	No [ ]
III. Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? **If yes, complete and attach Schedule III.**	Yes [X]	No [ ]	VIII. Did you hold any reportable positions on or before the date of filing in the current calendar year? **If yes, complete and attach Schedule VIII.**	Yes [ ]	No [X]
IV. Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset worth more than $1,000 in the reporting period? **If yes, complete and attach Schedule IV.**	Yes [X]	No [ ]	IX. Did you have any reportable agreement or arrangement with an outside entity? **If yes, complete and attach Schedule IX.**	Yes [ ]	No [X]
V. Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? **If yes, complete and attach Schedule V.**	Yes [ ]	No [X]	**Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.**		

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION — ANSWER EACH OF THESE QUESTIONS

TRUSTS—Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child?	Yes [ ]	No [X]
EXEMPTION—Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption?	Yes [ ]	No [X]

CERTIFICATION — THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended. The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct or its designee. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil penalties and criminal sanctions (*See* 5 U.S.C. app. 4, §104 and 18 U.S.C. §1001)

SIGNATURE OF REPORTING INDIVIDUAL Leonard L Boswell

DATE (Month/Day/Year) 5-14-97

SCHEDULE I — EARNED INCOME

List the source, type, and amount of earned income from any source (other than the filer's current employment by the U.S. Government) totalling $200 or more during the preceding calendar year. For a spouse, list the source and amount of any honoraria; list only the source for other spouse earned income exceeding $1,000.

	Source	Type	Amount
Examples	Keene State	Approved Teaching Fee	$6,000
	State of Maryland	Legislative Pension	$9,000
	Civil War Roundtable (Oct 2nd)	Spouse Speech	$1,000
	Ontario County Board of Education	Spouse Salary	NA
	Lamoni Community School	Spouse Salary	29,271
	Excel Communication Corporation	Spouse Commission	1,976
	State of Iowa	Legislative Pension	7,047

For payments to charity in lieu of honoraria, use Schedule II.

Name Leonard L. Boswell | Page 3 of 6

SCHEDULE III — ASSETS AND "UNEARNED" INCOME

BLOCK A — Asset and/or Income Source

Identify (a) each asset held for investment or production of income with a fair market value exceeding $1,000 at the end of the reporting year, and (b) any other asset or source of income which generated more than $200 in "unearned" income during the year. For rental property or land, provide an address. Provide full names of any mutual funds. For an IRA or retirement plan that is *self-directed*, list the underlying assets worth more than $1,000. For an IRA or retirement plan that is not selfdirected, name the institution holding the account.

Exclude: Your personal residence(s) (unless there is rental income), any debt owed to you by your spouse, or by your or your spouse's child, parent, or sibling; any deposits totalling $5,000 or less in personal savings accounts, any financial interests in or income derived from U.S. Government retirement programs.

If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC) or is jointly held (JT), in the optional column on the far left.

BLOCK B — Value of Asset

at close of reporting year

If you use a valuation method other than fair market value, please specify the method used

If an asset was sold and is included only because it generated income, the value should be "None."

BLOCK C — Type of Income

BLOCK D — Amount of Income

For IRA's and retirement plans that are *not* self-directed, you may write in "NA" for income

BLOCK E — Transaction

Indicate if asset was purchased (P), sold (S), or exchanged (E) in reporting year.

				A None	B $1 – $1,000	C $1,001 – $15,000	E $15,001 – $50,000	F $50,001 – $100,000	G $100,001 – $250,000	H $250,001 – $500,000	I $500,001 – $1,000,000	J $1,000,001 – $5,000,000	K $5,000,001 – $25,000,000	L $25,000,001 – $50,000,000	Over $50,000,000	DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Type of Income (Specify For Example: Partnership Income or Farm Income)	I None	II $1 – $200	III $201 – $1,000	IV $1,001 – $2,500	V $2,501 – $5,000	VI $5,001 – $15,000	VII $15,001 – $50,000	VIII $50,001 – $100,000	IX $100,001 – $1,000,000	X $1,000,001 – $5,000,000	XI Over $5,000,000	P, S, E
SP.		SP	Mega Corp Stock					X								X																		P
DC.	*Examples*		Simon & Schuster		Indefinite																	Royalties												
JT			1st Bank of Paducah, KY accounts					X										X									X							
	Agriculture Land 475 Acres - IA New Buda, Burell Township Decatur CO.							X									N/A									N/A							
	Farming Equipment						X										N/A									N/A							
	U.S. West Cellular						N/A									X									X								
	Breeding Stock							X								Sale of calves											X						
	Citizens State Bank, Lenox IA					X											X						X										
	Farmers Coop - Lenox IA Deferred Patronage					X										X								X									
	WHITCO OUTDOOR SIGNS					X											X							X									

For additional assets and unearned income, use next page.

SCHEDULE IV — TRANSACTIONS

Name Leonard L. Bosure II | Page 4 of 6

Report any purchase, sale, or exchange by you, your spouse, or dependent child during the reporting year of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child, or the purchase or sale of your personal residence, unless it is rented out.			Type of Transaction			Date	Amount of Transaction									
			PURCHASE	SALE	EXCHANGE	(MO/DAY/YR)	B $1,001–$15,000	C $15,001–$50,000	D $50,001–$100,000	E $100,001–$250,000	F $250,001–$500,000	G $500,001–$1,000,000	H $1,000,001–$5,000,000	I $5,000,001–$25,000,000	J $25,000,001–$50,000,000	K Over $50,000,000
SP, DC, JT	Asset															
SP	*Example*	Mega Corporation Common Stock	X			10–12–97		X								
	Sale of calves			X		11-20-97		X								

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SCHEDULE V — LIABILITIES

Report liabilities of over $10,000 owed to any one creditor ***at any time*** during the reporting period by you, your spouse, or dependent child. Mark the highest amount owed during the year. **Exclude:** Any mortgage on your personal residence (unless it is rented out); loans secured by automobiles, household furniture, or appliances, and liabilities owed to a spouse, or the child, parent, or sibling of you or your spouse. Report ***revolving charge accounts*** only if the balance at the end of the reporting period exceeded $10,000.

SP, DC, JT	Creditor	Type of Liability	Amount of Liability									
			B $10,001–$15,000	C $15,001–$50,000	D $50,001–$100,000	E $100,001–$250,000	F $250,001–$500,000	G $500,001–$1,000,000	H $1,000,001–$5,000,000	I $5,000,001–$25,000,000	J $25,000,001–$50,000,000	K Over $50,000,000
	Example First Bank of Wilmington, Delaware	Mortgage on 123 Main St., Dover, Del				X						
	Citizens St. Bank, Leon, IA	Loan on Machinery	X									
	" " " " "	Farm Operating Loans		X								
	" " " " "	Mortgage on Agriculture land (Some land leased to U.S. Government)		X								

SCHEDULE VI — GIFTS

Report the source, a brief description, and the value of all gifts totalling more than $250 received by you, your spouse, or a dependent child from any source during the year

Exclude: Gifts from relatives, gifts of personal hospitality of an individual, local meals, and gifts to a spouse or dependent child that are totally independent of his or her relationship to you. Gifts with a value of $100 or less need not be added towards the $250 disclosure threshold

Note: The gift rule (House Rule 51) prohibits gifts except as specifically provided in the rule.

Source	Description	Value
Example Mr. Joseph H. Smith, Anytown, Anystate	Silver Platter (determination on personal friendship received from Committee on Standards)	$270
NA		

Use additional sheets if more space is required.

SCHEDULE VII —TRAVEL PAYMENTS AND REIMBURSEMENTS

Identify the source and list travel itinerary, dates, and nature of expenses provided for travel and travel-related expenses totalling more than $250 received by you, your spouse, or a dependent child during the reporting period. Indicate whether a family member accompanied the traveler at the sponsor's expense, and the amount of time, if any, that was not at the sponsor's expense. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor.

Exclude: Travel-related expenses provided by federal, state, and local governments, or by a foreign government required to be separately reported under the Foreign Gifts and Decorations Act (5 U.S.C. § 7342); travel paid for by a Federal political committee; travel provided to a spouse or dependent child that is totally independent of his or her relationship to you.

	Source	Date(s)	Point of Departure—Destination—Point of Return	Lodging? (Y/N)	Food? (Y/N)	Was a Family Member Included? (Y/N)	Any time not at sponsor's expense
Examples	Chicago Chamber of Commerce	Mar. 2	Wash., D.C.—Chicago—Wash., D.C.	N	N	N	N
	Roycroft Corporation	Aug. 6–13	Wash., D.C.—Los Angeles—Cleveland	Y	Y	Y	4 Days
	Aspen Institute	Mar. 7-9	Wash. DC - Hershey, PA - Wash DC	Y	Y	Y	N

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LEONARD L. BOSWELL
3RD DISTRICT, IOWA

COMMITTEES
AGRICULTURE
SUBCOMMITTEE ON RISK MANAGEMENT, RESEARCH AND SPECIALTY CROPS
SUBCOMMITTEE ON LIVESTOCK, DAIRY, AND POULTRY
TRANSPORTATION AND INFRASTRUCTURE
SUBCOMMITTEE ON AVIATION
SUBCOMMITTEE ON WATER RESOURCES AND ENVIRONMENT

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1029 LONGWORTH BUILDING
WASHINGTON, DC 20515
(202) 225-3806

JOHN R. NORRIS
CHIEF OF STAFF

709 FURNAS DRIVE
SUITE 1
OSCEOLA, IOWA 50213
(515) 342-4801
TOLL FREE IOWA NUMBER
1-888-432-1984

Congress of the United States
House of Representatives
Washington, DC 20515–1503

June 11, 1998

The Clerk, U.S. House of Representatives
Legislative Resource Center
B106 Cannon House Office Building
Washington, D.C. 20515-6612

HC ✓ (1)

RE: Amendment to the 1997 Financial Disclosure Statement of U.S. Representative Leonard L. Boswell

Dear Clerk of the House:

I listed on my 1997 personal disclosure statement, on Schedule III, unearned income of $1,000 - $2,500 for rental of space on my agricultural land to Whitco Outdoor Signs.

I should have also included this as a "transaction" on Schedule IV. The transaction was a lease agreement with the Whitco Outdoor Sign Company for the amount of (B) $1,000 - $15,000. The asset involved in the lease transaction was my agricultural land, listed on Schedule III.

Sincerely,

Leonard L. Boswell

Leonard L. Boswell
Member of Congress

LLB:

PRINTED ON RECYCLED PAPER

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1997

FORM A
For use by Members, officers, and employees

98 MAY -5 PM 3:38

OFFICE OF THE CLERK
U.S. HOUSE OF REPRESENTATIVES

Frederick C. Boucher
(Full Name)

2329 Rayburn House Office Building
(Mailing Address)

202-225-3861
Daytime Telephone

Washington, D.C. 20515

HAND DELIVERED
(Office Use Only)

8

Filer Status	[X] Member of the U.S. House of Representatives	State Virginia District 09	[ ] Officer or Employee	Employing Office	A *$200 penalty* shall be assessed against anyone who files more than 30 days late.
Report Type	[X] Annual (May 15)	[ ] Amendment	[ ] Termination	Termination Date	

PRELIMINARY INFORMATION — ANSWER EACH OF THESE QUESTIONS

I Did you or your spouse have "earned" income (e.g., salaries or fees) of $200 or more from any source in the reporting period? **If yes, complete and attach Schedule I.** — Yes [ ] No [X]

II Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? **If yes, complete and attach Schedule II.** — Yes [ ] No [X]

III Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? **If yes, complete and attach Schedule III.** — Yes [X] No [ ]

IV Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset worth more than $1,000 in the reporting period? **If yes, complete and attach Schedule IV.** — Yes [X] No [ ]

V Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? **If yes, complete and attach Schedule V.** — Yes [ ] No [X]

VI Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $250 and not otherwise exempt)? **If yes, complete and attach Schedule VI.** — Yes [ ] No [X]

VII Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $250 from one source)? **If yes, complete and attach Schedule VII.** — Yes [X] No [ ]

VIII Did you hold any reportable positions on or before the date of filing in the current calendar year? **If yes, complete and attach Schedule VIII.** — Yes [X] No [ ]

IX Did you have any reportable agreement or arrangement with an outside entity? **If yes, complete and attach Schedule IX.** — Yes [ ] No [X]

Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION — ANSWER EACH OF THESE QUESTIONS

TRUSTS—Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child? — Yes [ ] No [X]

EXEMPTION—Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption? — Yes [ ] No [X]

CERTIFICATION — THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended. The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct or its designee. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil penalties and criminal sanctions (*See* 5 U.S.C. app. 4, §104 and 18 U.S.C. §1001).

SIGNATURE OF REPORTING INDIVIDUAL Frederick C. Boucher

DATE (Month/Day/Year) 05/05/98

413

Name Frederick C. Boucher | Page 2 of 8

SCHEDULE III — ASSETS AND "UNEARNED" INCOME

BLOCK A — Asset and/or Income Source

Identify (a) each asset held for investment or production of income with a fair market value exceeding $1,000 at the end of the reporting year, and (b) any other asset or source of income which generated more than $200 in "unearned" income during the year. For rental property or land, provide an address. Provide full names of any mutual funds. For an IRA or retirement plan that is *self-directed*, list the underlying assets worth more than $1,000. For an IRA or retirement plan that is not self-directed, name the institution holding the account.

Exclude: Your personal residence(s) (unless there is rental income), any debt owed to you by your spouse, or by your or your spouse's child, parent, or sibling, any deposits totalling $5,000 or less in personal savings accounts, any financial interests in or income derived from U.S. Government retirement programs.

If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC) or is jointly held (JT), in the optional column on the far left.

BLOCK B — Value of Asset at close of reporting year. If you use a valuation method other than fair market value, please specify the method used. If an asset was sold and is included only because it generated income, the value should be "None."

BLOCK C — Type of Income

BLOCK D — Amount of Income For IRA's and retirement plans that are *not* self-directed, you may write in "NA" for income.

BLOCK E — Transaction Indicate if asset was purchased (P), sold (S), or exchanged (E) in reporting year.

	BLOCK A	BLOCK B												BLOCK C							BLOCK D										BLOCK E
		A None	B $1 – $1,000	C $1,001 – $15,000	E $15,001 – $50,000	F $50,001 – $100,000	G $100,001 – $250,000	H $250,001 – $500,000	I $500,001 – $1,000,000	J $1,000,001 – $5,000,000	K $5,000,001 – $25,000,000	L $25,000,001 – $50,000,000	Over $50,000,000	DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Type of Income (Specify For Example, Partnership Income or Farm Income)	I None	II $1 – $200	III $201 – $1,000	IV $1,001 – $2,500	V $2,501 – $5,000	VI $5,001 – $15,000	VII $15,001 – $50,000	VIII $50,001 – $100,000	IX $100,001 – $1,000,000	X $1,000,001 – $5,000,000	XI Over $5,000,000	P, S, E
SP, DC, JT	*Examples* SP	Mega Corp Stock		Indefinite		X								X						Royalties											P
JT		1st Bank of Paducah, KY accounts					X									X										X						
		Nationsbank - Checking Acct.		X												X							X									
		1st Va. Bank-SavingsAcct.		X												X							X									
		Individual Retirement Acct.-NationsSecurities			X									X		X								X								
		1st Va. Bank-Preferred Stock		X										X								X										

For additional assets and unearned income, use next page.

SCHEDULE III — ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Name Frederick C. Boucher

SP, DC, JT	BLOCK A: Asset and/or Income Source	BLOCK B: Year-End Value of Asset												BLOCK C: Type of Income							BLOCK D: Amount of Income											BLOCK E: Transaction
		A None	B $1 – $1,000	C $1,001 – $15,000	D $15,001 – $50,000	E $50,001 – $100,000	F $100,001 – $250,000	G $250,001 – $500,000	H $500,001 – $1,000,000	I $1,000,001 – $5,000,000	J $5,000,001 – $25,000,000	K $25,000,001 – $50,000,000	L Over $50,000,000	DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Type of Income (Specify)	I None	II $1 – $200	III $201 – $1,000	IV $1,001 – $2,500	V $2,501 – $5,000	VI $5,001 – $15,000	VII $15,001 – $50,000	VIII $50,001 – $100,000	IX $100,001 – $1,000,000	X $1,000,001 – $5,000,000	XI Over $5,000,000	P, S, E
	Community Nat'l Bank- Common Stock			X										X								X									
	NationsSecurities- Savings Acct.				X											X								X							
	Mutual Fund- NationsSecurities				X									X			X								X						S
	Vanguard Mutual Fund				X									X			X							X							P
	Lot - Town of Damascus			X																											
	Lot - Washington County			X																											

This page may be copied if more space is required.

SCHEDULE IV — TRANSACTIONS

Name Frederick C. Boucher | Page 4 of 8

Report any purchase, sale, or exchange by you, your spouse, or dependent child during the reporting year of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child, or the purchase or sale of your personal residence, unless it is rented out.

SP, DC, JT	Asset	Type of Transaction: PURCHASE	SALE	EXCHANGE	Date (MO/DAY/YR)	Amount of Transaction: B ($1,001–$15,000)	C ($15,001–$50,000)	D ($50,001–$100,000)	E ($100,001–$250,000)	F ($250,001–$500,000)	G ($500,001–$1,000,000)	H ($1,000,001–$5,000,000)	I ($5,000,001–$25,000,000)	J ($25,000,001–$50,000,000)	K (Over $50,000,000)
SP	*Example.* Mega Corporation Common Stock	X			10-12-97		X								
	NationsSecurities - Mutual Fund		X		5/7/97		X								
	Vanguard Mutual Fund	X			5/7/97		X								

This page may be copied if more space is required.

SCHEDULE VII —TRAVEL PAYMENTS AND REIMBURSEMENTS

Identify the source and list travel itinerary, dates, and nature of expenses provided for travel and travel-related expenses totalling more than $250 received by you, your spouse, or a dependent child during the reporting period. Indicate whether a family member accompanied the traveler at the sponsor's expense, and the amount of time, if any, that was not at the sponsor's expense. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor.

Exclude: Travel-related expenses provided by federal, state, and local governments, or by a foreign government required to be separately reported under the Foreign Gifts and Decorations Act (5 U.S.C. § 7342); travel paid for by a Federal political committee; travel provided to a spouse or dependent child that is totally independent of his or her relationship to you.

	Source	Date(s)	Point of Departure—Destination—Point of Return	Lodging? (Y/N)	Food? (Y/N)	Was a Family Member Included? (Y/N)	Any time not at sponsor's expense
Examples	Chicago Chamber of Commerce	Mar. 2	Wash., D.C.—Chicago—Wash., D.C.	N	N	N	N
	Roycroft Corporation	Aug. 6–13	Wash., D.C.—Los Angeles—Cleveland	Y	Y	Y	4 Days
SEE ATTACHED							

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SCHEDULE VII
TRAVEL PAYMENTS AND REIMBURSEMENTS

SOURCE	LOCATION	EXPENSES	DATE
National Security Caucus Foundation	Serbia and Croatia	Travel from Washington, DC to Belgrade, Serbia and Zagreb, Croatia for discussions with government officials and opposition party leaders on election prospects and the American force presence in Bosnia. Meals and lodging for six nights.	1/9/97-1/15/97
Barnes and Thornburg Attorneys	Indianapolis, Indiana	Travel from Washington, DC to Indianapolis and return. Meals and one night of lodging for speech to forum on implementation of the 1996 Telecommunications Act.	1/17/97
National Security Caucus Foundation	Mexico City, Mexico	Travel to Mexico City, meals and three nights lodging for meetings with government ministers on the question of continued certification of Mexico for cooperation in anti-drug law enforcement efforts.	3/6/97-3/9/97
Pacific Telecommunications, Inc.	Katchacan, Alaska	Travel to Katchacan, meals and two nights lodging for speech to telecommunications forum on implementation of 1996 Telecommunications Act.	8/27/97-8/28/97
Human Rights Project	Vietnam and Nepal	Travel from Washington, DC, meals and lodging for six nights for discussions with government officials about human rights protections, religious freedom guarantees and the treatment of refugees.	3/23/97-3/30/97 7 days of government meetings occurred at my own expense in Napal and India.

SCHEDULE VII
TRAVEL PAYMENTS AND REIMBURSEMENTS

Alaska Wilderness League	Fairbanks and Arctic Village, Alaska	Travel from Washington, DC, meals and three nights lodging for conference on the status of the Arctic National Wildlife Refuge.	6/30/97 - 7/2/97
Religion Freedom Alliance	Eymet and Paris, France	Travel to Eymet, France, meals and two nights lodging for conference with Vietnamese refugees on the Vietnamese Government's treatment for non-government sanctioned religions.	7/18/97 - 7/20/97
		Travel to Paris and Eymet, France, meals and three nights lodging for conference with French Assistant Foreign Minister in charge of Asian Relations and US Officials concerning the forgoing.	12/2/97 - 12/5/97
The Ripon Educational Foundation	Prague, The Czech Republic	Travel to Prague, meals and lodging for seven nights for speech and panel discussions to American-European Telecommunications Conference on the implementation of the 1996 Telecommunications Act and the status of telecommunications competition in the United States and Europe.	8/8/97 - 8/15/97

SCHEDULE VIII — POSITIONS

Report all positions, compensated or uncompensated, held during the current calendar year as an officer, director, trustee of an organization, partner, proprietor, representative, employee, or consultant of any corporation, firm, partnership, or other business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States

Exclude: Positions held in any religious, social, fraternal, or political entities, positions solely of an honorary nature, and positions listed on Schedule I

Position	Name of Organization
Member - Board of Directors	1st Virginia Bank - Mountain Empire

SCHEDULE IX — AGREEMENTS

Identify the date, parties to, and general terms of any agreement or arrangement with respect to future employment; a leave of absence during the period of government service, continuation or deferral of payments by a former or current employer other than the U S Government, or continuing participation in an employee welfare or benefit plan maintained by a former employer

Date	Parties To	Terms of Agreement

Use additional sheets if more space is required.

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1997

Form A
For use by Members, officers, and employees

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(Office Use Only)

F. Allen Boyd, Jr.
(Full Name)

Route 2, Box 33
(Mailing Address)

Monticello FL 32344

Daytime Telephone: 202-225-5235

Filer Status: [X] Member of the U.S. House of Representatives — State: FL — District: 02 — [ ] Officer or Employee — Employing Office:

Report Type: [X] Annual (May 15) — [ ] Amendment — [ ] Termination — Termination Date:

A $200 penalty shall be assessed against anyone who files more than 30 days late.

PRELIMINARY INFORMATION -- ANSWER EACH OF THESE QUESTIONS

I. Did you or your spouse have "earned" income (e.g., salaries or fees) of $200 or more from any source in the reporting period? **If yes, complete and attach Schedule I.** Yes [X] No [ ]

II. Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? **If yes, complete and attach Schedule II.** Yes [X] No [ ]

III. Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? **If yes, complete and attach Schedule III.** Yes [X] No [ ]

IV. Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset worth more than $1,000 in the reporting period? **If yes, complete and attach Schedule IV.** Yes [ ] No [X]

V. Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? **If yes, complete and attach Schedule V.** Yes [X] No [ ]

VI. Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $250 and not otherwise exempt)? **If yes, complete and attach Schedule VI.** Yes [ ] No [X]

VII. Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $250 from one source)? **If yes, complete and attach Schedule VII.** Yes [X] No [ ]

VIII. Did you hold any reportable positions on or before the date of filing in the current calendar year? **If yes, complete and attach Schedule VIII.** Yes [X] No [ ]

IX. Did you have any reportable agreement or arrangement with an outside entity? **If yes, complete and attach Schedule IX.** Yes [ ] No [X]

Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION -- ANSWER EACH OF THESE QUESTIONS

TRUSTS - Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child? (See Instructions, pages 10-11.) Yes [ ] No [X]

EXEMPTION. Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption? (See Instructions, page 11.) Yes [ ] No [X]

CERTIFICATION -- THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended. The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct or its designee. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil penalties and criminal sanctions (See 5 U.S.C. app. 4, 104 and 18 U.S.C. 1001)

SIGNATURE OF REPORTING INDIVIDUAL: F. Allen Boyd, Jr.

DATE (Month/Day/Year): 5.14.98

421

SCHEDULE I -- EARNED INCOME

List the source, type, and amount of earned income from any source (other than the filer's current employment by the U.S. Government) totalling $200 or more during the preceding calendar year. For a spouse, list the source and amount of any honoraria; list only the source for other spouse earned income exceeding $1,000. For further information, see Instructions, pages 12-13.

	Source	Type	Amount
Examples:	Keene State	Approved Teaching Fee	$10,000
	State of Maryland	Legislative Pension	$9,000
	Civil War Roundtable (Oct. 2nd)	Spouse Speech	$1,000
	Ontario County Board of Education	Spouse Salary	NA
	Thomas L. Folsom, Jr.	Insurance Commission*on business prior to 1/7/97	$41,323 46

For payments to charity in lieu of honoraria, use Schedule II.

SCHEDULE II -- PAYMENTS IN LIEU OF HONORARIA MADE TO CHARITY

List the source, activity (i.e., speech, appearance, or article), date, and amount of any payment made by the sponsor of an event to a charitable organization in lieu of an honorarium.
A separate confidential list of charities receiving such payments must be filed directly with the Committe on Standards of Official Conduct. An envelope for transmitting the list is included in each Member's filing package. For further information, see Instructions, pages 13-14.

	Source	Activity	Date	Amount
Examples:	Association of American Associations, Wash., D.C.	Speech	Feb. 2, 1994	$2,000
	XYZ Magazine	Article	Aug. 13, 1994	$500
	K-Mart	Race for Charity	9/10/97	$2,500.00

SCHEDULE III -- ASSETS AND "UNEARNED" INCOME

BLOCK A **Asset and/or Income Source** Identify (a) each asset held for investment or production of income with a fair market value exceeding $1,000 at the end of the reporting year, and (b) any other asset or source of income which generated more than $200 in "unearned" income during the year. For rental property or land, provide an address. Provide full names of any mutual funds. For an IRA or retirement plan that is *self-directed*, list the underlying assets worth more than $1,000. For an IRA or retirement plan that is *not* self-directed, name the institution holding the account. **Exclude:** Your personal residence(s) (unless there is rental income); any debt owed to you by your spouse, or by your or your spouse's child, parent, or sibling; any deposits totalling $5,000 or less in personal savings accounts; any financial interests in or income derived from U.S. Government retirement programs. If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC) or is jointly held (JT), in the optional column on the far left. For further information, see instructions, pages 14-20	BLOCK B **Value of Asset** at close of reporting year. If you use a valuation method other than fair market value, please specify the method used. If an asset was sold and is included only because it generated income, the value should be "None."	BLOCK C **Type of Income** If other than one of the listed categories, specify the type of income by writing a brief description in this block	BLOCK D **Amount of Income** For IRA's and retirement plans that are *not* self-directed, you may write in "NA" for income	BLOCK E **Transaction** Indicate if asset was purchased(P), sold(S), or exchanged(E) in reporting year
SP DC JT	Examples: SP | Mega Corp. Stock SP | 123 Main St., Dover, Del. | 1st Bank of Paducah, KY accounts	$15,001 - $50,000 $250,001 - $500,000 $50,001 - $100,000	Dividends Rent Interest	$201 - $1,000 $1,001 - $2,500 $5,001 - $15,000	P
	ABC Bank Group	$100,001 - $250,000	Dividends	$2,501 - $5,000	
	Capital City Bank Group	$100,001 - $250,000	Dividends	$1,001 - $2,500	
	BCT Gin Co. Inc	$100,001 - $250,000	Dividends	$5,001 - $15,000	
	Basic Beef Masters	None	None	None	
	Wright Patterson Fed. Credit Union	$50,001 - $100,000	Interest	$1,001 - $2,500	
	Boyd Family Farms, Inc.	$100,001 - $250,000	Stock	None	
	F.A. Boyd & Sons, Inc.	$100,001 - $250,000	Stock	None	
	FABJ, Inc.	None	None	None	

SCHEDULE III -- ASSETS AND "UNEARNED" INCOME

	IDS/American Express IRA	$15,001 - $50,000	Retirement	$15,001 - $50,000	

SCHEDULE V -- LIABILITIES

Report liabilities of over $10,000 owed to any one creditor ***at any time*** during the reporting period by you, your spouse, or dependent child. Mark the highest amount owed during the year
Exclude: Any mortgage on your personal residence (unless it is rented out), loans secured by automobiles, household furniture, or appliances, and liabilities owed to a spouse, or the child, parent, or sibling of you or your spouse. Report ***revolving charge accounts*** only if the balance at the end of the reporting period exceeded $10,000. For further information, see Instructions, pages 21-22

SP,DC,JT	Creditor	Type of Liability	Amount of Liability
	Example: First Bank of Wilmington, Delaware	Mortgage on 123 Main St., Dover, Del	$100,001 - $250,000
	Farm Credit Services, Monticello, Florida	Farm Loan	$500,001 - $1,000,000

SCHEDULE VII -- TRAVEL PAYMENTS AND REIMBURSEMENTS

Identify the source and list travel itinerary, dates, and nature of expenses provided for travel and travel-related expenses totalling more than $250 received by you, your spouse, or a dependent child during the reporting period. Indicate whether a family member accompanied the traveler at the sponsor's expense, and the amount of time, if any, that was not at the sponsor's expense. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor. Exclude: Travel-related expenses provided by federal, state and local governments, or by a foreign government required to be separately reported under the Foreign Gifts and Decorations Act (5 U.S.C. 7342), travel paid for by a Federal political committee, travel provided to a spouse or dependent child that is totally independent of his or her relationship to you. For further information, see instructions, pages 24-26.

Source	Date(s)	Point of Departure--Destination--Point of Return	Lodging? (Y/N)	Food? (Y/N)	Was a Family Member Included? (Y/N)	Any time not at sponsor's expense
Examples Chicago Chamber of Commerce	Mar 2	Wash., D.C.-Chicago-Wash., D.C.	N	N	N	N
Mega Corporation	Aug 6-13	Wash., D.C.-Los Angeles-Cleveland	Y	Y	Y	4 Days
D-Dot Timberlands	January 17-19, 1997	Tallahassee-Jacksonville-DC	Y	Y	N	None

SCHEDULE VIII -- POSITIONS

Report all positions, compensated or uncompensated, held during the current calendar year as an officer, director, trustee of an organization, partner, proprietor, representative, employee, or consultant of any corporation, firm, partnership, or other business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States. For further information, see instructions, page 26.

Exclude: Positions held in any religious, social, fraternal, or political entities, positions solely of an honorary nature, and positions listed on Schedule I.

Position	Organization
President & Majority Stockholder	Boyd Family Farms, Inc
President	FABJ, Inc
Board Member	Jefferson County Farm Bureau

ALLEN BOYD
SECOND DISTRICT, FLORIDA
COMMITTEES
NATIONAL SECURITY
SMALL BUSINESS

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WASHINGTON OFFICE
237 LONGWORTH HOUSE OFFICE BUILDING
WASHINGTON, DC 20515
(202) 225-5235
DISTRICT OFFICES
301 SOUTH MONROE STREET, ROOM 108
TALLAHASSEE, FL 32301
(850) 561-3979
30 WEST GOVERNMENT STREET, ROOM 203
PANAMA CITY, FL 32401
(850) 785-0812

Congress of the United States
House of Representatives
Washington, DC 20515

May 15 1998

Office of the Clerk
B-106 Cannon House Office Building
US House of Representatives
Washington, DC 20515

To whom it may concern;

This letter is to amend the financial disclosure statement submitted on May 15, 1997 to include the following information which was inadvertently omitted:

Amendment to May 15, 1997 report:

Schedule III: F.A. Boyd & Sons (asset)
$100,000-$250,000 (value of asset)
None (amount of income)

IDS/American Express (asset)
$15,001-$50,000 (value of asset)
Retirement

Please feel free to contact me at 5-5235 if you have additional questions.

Sincerely,

F. Allen Boyd, Jr.

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MC

(Office Use Only)

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UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1997

Form A
For use by Members, officers, and employees

Kevin Patrick Brady
(Full Name)

P O Box 8277
(Mailing Address)

The Woodlands TX 77387

Daytime Telephone (202) 225-4901

Filer Status
[X] Member of the U S House of Representatives — State TX, District 08
[ ] Officer or Employee — Employing Office

Report Type
[X] Annual (May 15)
[ ] Amendment
[ ] Termination — Termination Date

A $200 penalty shall be assessed against anyone who files more than 30 days late.

PRELIMINARY INFORMATION -- ANSWER EACH OF THESE QUESTIONS

I Did you or your spouse have "earned" income (e g , salaries or fees) of $200 or more from any source in the reporting period?
If yes, complete and attach Schedule I. Yes [X] No [ ]

II Did any individual or organization make a donation to charity in lieu of paying you for a speech, apppearance, or article in the reporting period?
If yes, complete and attach Schedule II. Yes [ ] No [X]

III Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period?
If yes, complete and attach Schedule III. Yes [X] No [ ]

IV Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset worth more than $1,000 in the reporting period?
If yes, complete and attach Schedule IV. Yes [ ] No [X]

V Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period?
If yes, complete and attach Schedule V. Yes [ ] No [X]

VI Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i e , aggregating more than $250 and not otherwise exempt)?
If yes, complete and attach Schedule VI. Yes [ ] No [X]

VII Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $250 from one source)?
If yes, complete and attach Schedule VII. Yes [ ] No [X]

VIII Did you hold any reportable positions on or before the date of filing in the current calendar year?
If yes, complete and attach Schedule VIII. Yes [X] No [ ]

IX Did you have any reportable agreement or arrangement with an outside entity?
If yes, complete and attach Schedule IX. Yes [ ] No [X]

Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION -- ANSWER EACH OF THESE QUESTIONS

TRUSTS- Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child? (See Instructions, pages 10-11) Yes [ ] No [X]

EXEMPTION Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption? (See Instructions, page 11) Yes [ ] No [X]

CERTIFICATION -- THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct or its designee Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil penalties and criminal sanctions (See 5 U S C app 4, 104 and 18 U S C 1001)

SIGNATURE OF REPORTING INDIVIDUAL K. Brady

DATE (Month/Day/Year) 6-11-98

430

Name Kevin Patrick Brady	Page ___ of __

SCHEDULE I -- EARNED INCOME

List the source, type, and amount of earned income from any source (other than the filer's current employment by the U.S. Government) totalling $200 or more during the preceding calendar year. For a spouse, list the source and amount of any honoraria; list only the source for other spouse earned income exceeding $1,000. For further information, see instructions, pages 12-13.

	Source	Type	Amount
Examples.	Keene State	Approved Teaching Fee	$10,000
	State of Maryland	Legislative Pension	$9,000
	Civil War Roundtable (Oct 2nd)	Spouse Speech	$1,000
	Ontario County Board of Education	Spouse Salary	NA
	U.S. House of Representative	Salary: Kevin Brady	$121,724.38
	Chase Bank of Texas, N.A.	Salary: Spouse (Cathy)	NA

For payments to charity in lieu of honoraria, use Schedule II.

SCHEDULE III -- ASSETS AND "UNEARNED" INCOME

BLOCK A **Asset and/or Income Source** Identify (a) each asset held for investment or production of income with a fair market value exceeding $1,000 at the end of the reporting year, and (b) any other asset or source of income which generated more than $200 in "unearned" income during the year. For rental property or land, provide an address. Provide full names of any mutual funds. For an IRA or retirement plan that is *self-directed*, list the underlying assets worth more than $1,000. For an IRA or retirement plan that is *not* self-directed, name the institution holding the account. **Exclude:** Your personal residence(s) (unless there is rental income), any debt owed to you by your spouse, or by your or your spouse's child, parent, or sibling, any deposits totalling $5,000 or less in personal savings accounts; any financial interests in or income derived from U.S. Government retirement programs. If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC) or is jointly held (JT), in the optional column on the far left. For further information, see Instructions, pages 14-20			BLOCK B **Value of Asset** at close of reporting year. If you use a valuation method other than fair market value, please specify the method used. If an asset was sold and is included only because it generated income, the value should be "None."	BLOCK C **Type of Income** If other than one of the listed categories, specify the type of income by writing a brief description in this block.	BLOCK D **Amount of Income** For IRA's and retirement plans that are *not* self-directed, you may write in "NA" for income.	BLOCK E **Transaction** Indicate if asset was purchased(P), sold(S), or exchanged(E) in reporting year.
SP, DC, *Examples* JT	SP	Mega Corp. Stock 123 Main St., Dover, Del. 1st Bank of Paducah, KY accounts	$15,001 - $50,000 $250,001 - $500,000 $50,001 - $100,000	Dividends Rent Interest	$201 - $1,000 $1,001 - $2,500 $5,001 - $15,000	P
	Annuity Fidelity VIP Growth Fund		$15,001 - $50,000	NA	None	NA
	Annuity NEUB/BER AMT Growth Fund		$1,001 - $15,000	NA	None	NA
	IRA Putnam Growth & Income Fund		$15,001 - $50,000	NA	None	NA
	IRA Putnam U.S. Government Income Trust		$1,001 - $15,000	NA	None	NA
	State of Texas Retirment System		$1,001 - $15,000	NA	None	NA
SP	Chase Securities of Texas: Compaq Computer Stock		$15,001 - $50,000	NA	None	NA
SP	Chase Retirement Plan		$15,001 - $50,000	NA	None	NA

SCHEDULE III -- ASSETS AND "UNEARNED" INCOME

SP	Chase Savings Retirement Plan 401k	$100,001 - $250,000	NA	None	NA
SP	Chase Manhattan Employee Stock Purchase Plan	$1,001 - $15,000	NA	None	NA
SP	Chase Securities Employee Stock Option Plan	$15,001 - $50,000	NA	None	NA
SP	Texas Commerce Bank Super Savings Account	$1,001 - $15,000	NA	None	NA
JT	Chase Bank of Texas Personal Checking Account	$1,001 - $15,000	NA	None	NA
	U.S. House of Representatives Federal Retirement Savings Plan	$1,001 - $15,000	NA	None	NA

Name Kevin Patrick Brady	Page ____ of ___

SCHEDULE VIII -- POSITIONS

Report all positions, compensated or uncompensated, held during the current calendar year as an officer, director, trustee of an organization, partner, proprietor, representative, employee, or consultant of any corporation, firm, partnership, or other business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States. For further information, see Instructions, page 26.

Exclude: Positions held in any religious, social, fraternal, or political entities; positions solely of an honorary nature; and positions listed on Schedule I.

Position	Organization
Advisory Board Member	American Heart Association - Montgomery County Chapter
Advisory Board Member	Montgomery County Pachyderm Club
Advisory Board Member	Morton Blackwell Leadership Insitute
Board Member	Women Helping Women, Inc.

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1997

FORM A
For use by Members, officers, and employees

RECEIVED
99 MAY 15 PM 8:55
OFFICE OF THE CLERK
U.S. HOUSE OF REPRESENTATIVES

Hon. Corrine Brown
(Full Name)

1610 Longworth House Office Bldg.
(Mailing Address)

Washington, DC 20515

Daytime Telephone: 202-225-0123

MC INSIDE MAIL (4)
(Office Use Only)

Filer Status	[X] Member of the U.S. House of Representatives	State: FL District: 3rd	[ ] Officer or Employee	Employing Office:
Report Type	[X] Annual (May 15)	[ ] Amendment	[ ] Termination	Termination Date:

A *$200 penalty* shall be assessed against anyone who files more than 30 days late.

PRELIMINARY INFORMATION — ANSWER EACH OF THESE QUESTIONS

I. Did you or your spouse have "earned" income (e.g., salaries or fees) of $200 or more from any source in the reporting period? **If yes, complete and attach Schedule I.**	Yes [ ]	No [X]	VI. Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $250 and not otherwise exempt)? **If yes, complete and attach Schedule VI.**	Yes [ ]	No [X]
II. Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? **If yes, complete and attach Schedule II.**	Yes [ ]	No [X]	VII. Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $250 from one source)? **If yes, complete and attach Schedule VII.**	Yes [X]	No [ ]
III. Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? **If yes, complete and attach Schedule III.**	Yes [X]	No [ ]	VIII. Did you hold any reportable positions on or before the date of filing in the current calendar year? **If yes, complete and attach Schedule VIII.**	Yes [ ]	No [X]
IV. Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset worth more than $1,000 in the reporting period? **If yes, complete and attach Schedule IV.**	Yes [ ]	No [X]	IX. Did you have any reportable agreement or arrangement with an outside entity? **If yes, complete and attach Schedule IX.**	Yes [ ]	No [X]
V. Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? **If yes, complete and attach Schedule V.**	Yes [X]	No [ ]	**Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.**		

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION — ANSWER EACH OF THESE QUESTIONS

TRUSTS—Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child?	Yes [ ]	No [X]
EXEMPTION—Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption?	Yes [ ]	No [X]

CERTIFICATION — THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

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SIGNATURE OF REPORTING INDIVIDUAL Corrine Brown

DATE (Month/Day/Year) May 14, 1998

435

Name HON. CORRINE BROWN | Page 2 of 4

SCHEDULE III — ASSETS AND "UNEARNED" INCOME

BLOCK A — Asset and/or Income Source

Identify (a) each asset held for investment or production of income with a fair market value exceeding $1,000 at the end of the reporting year, and (b) any other asset or source of income which generated more than $200 in "unearned" income during the year. For rental property or land, provide an address. Provide full names of any mutual funds. For an IRA or retirement plan that is *self-directed*, list the underlying assets worth more than $1,000. For an IRA or retirement plan that is not selfdirected, name the institution holding the account.

Exclude: Your personal residence(s) (unless there is rental income); any debt owed to you by your spouse, or by your or your spouse's child, parent, or sibling; any deposits totalling $5,000 or less in personal savings accounts; any financial interests in or income derived from U.S. Government retirement programs.

If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC) or is jointly held (JT), in the optional column on the far left.

BLOCK B — Value of Asset

at close of reporting year.
If you use a valuation method other than fair market value, please specify the method used.
If an asset was sold and is included only because it generated income, the value should be "None."

BLOCK C — Type of Income

BLOCK D — Amount of Income

For IRA's and retirement plans that are *not* self-directed, you may write in "NA" for income.

BLOCK E — Transaction

Indicate if asset was purchased (P), sold (S), or exchanged (E) in reporting year.

	BLOCK A		BLOCK B												BLOCK C							BLOCK D										BLOCK E
			A None	B $1 – $1,000	C $1,001 – $15,000	$15,001 – $50,000	E $50,001 – $100,000	F $100,001 – $250,000	G $250,001 – $500,000	H $500,001 – $1,000,000	I $1,000,001 – $5,000,000	J $5,000,001 – $25,000,000	K $25,000,001 – $50,000,000	L Over $50,000,000	DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Type of Income (Specify, For Example, Partnership Income or Farm Income)	I None	II $1 – $200	III $201 – $1,000	IV $1,001 – $2,500	V $2,501 – $5,000	VI $5,001 – $15,000	VII $15,001 – $50,000	VIII $50,001 – $100,000	IX $100,001 – $1,000,000	X $1,000,001 – $5,000,000	XI Over $5,000,000	P, S, E
SP, DC, JT	*Examples:*	SP	Mega Corp. Stock				X								X										X					X		P
			Simon & Schuster		Indefinite																											
			1st Bank of Paducah, KY accounts					X								X					Royalties					X						
	1844 WILLOWOOD DR. JACKSONVILLE, FL						X									X									X							
	ACCOUNTS RECEIVABLE FOR SALE OF: GATOR TRAVEL AGENCY, EMILIO F. TORRES, FERNANDO J. ALVAREZ, FERNANDO A. ALVAREZ (DEBTORS)						X											X				X										

For additional assets and unearned income, use next page.

SCHEDULE V — LIABILITIES

Report liabilities of over $10,000 owed to any one creditor ***at any time*** during the reporting period by you, your spouse, or dependent child. Mark the highest amount owed during the year. **Exclude:** Any mortgage on your personal residence (unless it is rented out); loans secured by automobiles, household furniture, or appliances; and liabilities owed to a spouse, or the child, parent, or sibling of you or your spouse. Report ***revolving charge accounts*** only if the balance at the end of the reporting period exceeded $10,000.

SP, DC, JT	Creditor	Type of Liability	Amount of Liability									
			B $10,001–$15,000	C $15,001–$50,000	D $50,001–$100,000	E $100,001–$250,000	F $250,001–$500,000	G $500,001–$1,000,000	H $1,000,001–$5,000,000	I $5,000,001–$25,000,000	J $25,000,001–$50,000,000	K Over $50,000,000
	Example: First Bank of Wilmington, Delaware	Mortgage on 123 Main St., Dover, Del.				X						
	HOUSING INVESTMENT, INC., JACKSONVILLE, FL	MORTGAGE ON 1844 WILLOWOOD DRIVE, JACKSONVILLE, FL		X								
	BARNETT BANK OF FLORIDA	LOAN - PERSONAL			X							

SCHEDULE VI — GIFTS

Report the source, a brief description, and the value of all gifts totalling more than $250 received by you, your spouse, or a dependent child from any source during the year.

Exclude: Gifts from relatives, gifts of personal hospitality of an individual, local meals, and gifts to a spouse or dependent child that are totally independent of his or her relationship to you. Gifts with a value of $100 or less need not be added towards the $250 disclosure threshold.

Note: The gift rule (House Rule 51) prohibits gifts except as specifically provided in the rule.

Source	Description	Value
Example: Mr. Joseph H. Smith, Anytown, Anystate	Silver Platter (determination on personal friendship received from Committee on Standards)	$270

Use additional sheets if more space is required.

Name HON. CORRINE BROWN | Page 4 of 4

SCHEDULE VII —TRAVEL PAYMENTS AND REIMBURSEMENTS

Identify the source and list travel itinerary, dates, and nature of expenses provided for travel and travel-related expenses totalling more than $250 received by you, your spouse, or a dependent child during the reporting period. Indicate whether a family member accompanied the traveler at the sponsor's expense, and the amount of time, if any, that was not at the sponsor's expense. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor.

Exclude: Travel-related expenses provided by federal, state, and local governments, or by a foreign government required to be separately reported under the Foreign Gifts and Decorations Act (5 U.S.C. § 7342); travel paid for by a Federal political committee; travel provided to a spouse or dependent child that is totally independent of his or her relationship to you.

Source	Date(s)	Point of Departure—Destination—Point of Return	Lodging? (Y/N)	Food? (Y/N)	Was a Family Member Included? (Y/N)	Any time not at sponsor's expense
Examples: Chicago Chamber of Commerce	Mar. 2	Wash., D.C.—Chicago—Wash., D.C.	N	N	N	N
Roycroft Corporation	Aug. 8–13	Wash., D.C.—Los Angeles—Cleveland	Y	Y	Y	4 Days
THE FLORIDA CHAMBER OF COMMERCE	FEB. 13-14	DC - ORLANDO - JACKSONVILLE	Y	Y	N	N
ISTED; - INSTITUT DES SCIENCES ET DES TECHNIQUES DE L'EQUIPMENT ET DE L'ENVIRONMENT POUR LE DEVELOPMENT	FEB 15-22	DC - PARIS, FRANCE - DC	Y	Y	N	N
ROBIN WILLIAMS AND FAMILY	APR. 19-23	JACKSONVILLE - QUITO, ECUADOR - JACKSONVILLE	Y	Y	N	N
ASPEN INSTITUTE	MAR. 7-9	DC - HERSHEY, PA - DC	Y	Y	N	N

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UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1997

FORM A
For use by Members, officers, and employees

RECEIVED
93 MAY 15 AM 9 47
OFFICE OF THE CLERK
HOUSE OF REPRESENTATIVES
INSIDE MAIL
MC (5)
(Office Use Only)

George E. Brown, Jr.
(Full Name)

2300 Rayburn HOB
(Mailing Address)

Washington, DC 20515

(202) 225-6161
Daytime Telephone

Filer Status	[X] Member of the U.S. House of Representatives	State CA District 42	[ ] Officer or Employee	Employing Office
Report Type	[X] Annual (May 15)	[ ] Amendment	[ ] Termination	Termination Date

A *$200 penalty* shall be assessed against anyone who files more than 30 days late.

PRELIMINARY INFORMATION — ANSWER EACH OF THESE QUESTIONS

I Did you or your spouse have "earned" income (e.g., salaries or fees) of $200 or more from any source in the reporting period? **If yes, complete and attach Schedule I.** — Yes [X] No [ ]

II Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? **If yes, complete and attach Schedule II.** — Yes [ ] No [X]

III Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? **If yes, complete and attach Schedule III.** — Yes [X] No [ ]

IV Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset worth more than $1,000 in the reporting period? **If yes, complete and attach Schedule IV.** — Yes [ ] No [X]

V Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? **If yes, complete and attach Schedule V.** — Yes [X] No [ ]

VI Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $250 and not otherwise exempt)? **If yes, complete and attach Schedule VI.** — Yes [X] No [ ]

VII Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $250 from one source)? **If yes, complete and attach Schedule VII.** — Yes [X] No [ ]

VIII Did you hold any reportable positions on or before the date of filing in the current calendar year? **If yes, complete and attach Schedule VIII.** — Yes [ ] No [X]

IX Did you have any reportable agreement or arrangement with an outside entity? **If yes, complete and attach Schedule IX.** — Yes [ ] No [X]

Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION — ANSWER EACH OF THESE QUESTIONS

TRUSTS—Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child? — Yes [ ] No [X]

EXEMPTION—Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption? — Yes [ ] No [X]

CERTIFICATION — THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended. The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct or its designee. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil penalties and criminal sanctions (*See* 5 U.S.C. app. 4, §104 and 18 U.S.C. §1001).

SIGNATURE OF REPORTING INDIVIDUAL George E. Brown, Jr. **DATE** (Month/Day/Year) 5/14/98

Name George E. Brown, Jr.	Page 2 of 3

SCHEDULE I — EARNED INCOME

List the source, type, and amount of earned income from any source (other than the filer's current employment by the U.S. Government) totalling $200 or more during the preceding calendar year. For a spouse, list the source and amount of any honoraria; list only the source for other spouse earned income exceeding $1,000.

	Source	Type	Amount
Examples	Keene State	Approved Teaching Fee	$6,000
	State of Maryland	Legislative Pension	$9,000
	Civil War Roundtable (Oct 2nd)	Spouse Speech	$1,000
	Ontario County Board of Education	Spouse Salary	NA
	State of California	legislative pension	6,982.51
	U. S. Government	spouse salary	

For payments to charity in lieu of honoraria, use Schedule II.

SCHEDULE III — ASSETS AND "UNEARNED" INCOME

BLOCK A — Asset and/or Income Source

Identify (a) each asset held for investment or production of income with a fair market value exceeding $1,000 at the end of the reporting year, and (b) any other asset or source of income which generated more than $200 in "unearned" income during the year. For rental property or land, provide an address. Provide full names of any mutual funds. For an IRA or retirement plan that is *self-directed*, list the underlying assets worth more than $1,000. For an IRA or retirement plan that is not selfdirected, name the institution holding the account

Exclude: Your personal residence(s) (unless there is rental income), any debt owed to you by your spouse, or by your or your spouse's child, parent, or sibling; any deposits totalling $5,000 or less in personal savings accounts; any financial interests in or income derived from U.S. Government retirement programs.

If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC) or is jointly held (JT), in the optional column on the far left

BLOCK B — Value of Asset

at close of reporting year
If you use a valuation method other than fair market value, please specify the method used
If an asset was sold and is included only because it generated income, the value should be "None."

BLOCK C — Type of Income

BLOCK D — Amount of Income

For IRA's and retirement plans that are *not* self-directed, you may write in "NA" for income.

BLOCK E — Transaction

Indicate if asset was purchased (P), sold (S), or exchanged (E) in reporting year.

	BLOCK A	A None	B $1 – $1,000	C $1,001 – $15,000	$15,001 – $50,000	E $50,001 – $100,000	F $100,001 – $250,000	G $250,001 – $500,000	H $500,001 – $1,000,000	I $1,000,001 – $5,000,000	J $5,000,001 – $25,000,000	K $25,000,001 – $50,000,000	L Over $50,000,000	BLOCK C: DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Type of Income (Specify. For Example, Partnership Income or Farm Income)	BLOCK D: I None	II $1 – $200	III $201 – $1,000	IV $1,001 – $2,500	V $2,501 – $5,000	VI $5,001 – $15,000	VII $15,001 – $50,000	VIII $50,001 – $100,000	IX $100,001 – $1,000,000	X $1,000,001 – $5,000,000	XI Over $5,000,000	BLOCK E: P, S, E
SP														X																		P
DC	*Examples*		Indefinite			X															Royalties											
JT							X									X																
Jt	unimproved lot tract 339-LA			X																												
sp	2350 Osbun Rd.SB,CA			X											NA							NA										
Jt	2695 Spruce St,SB,CA					X									X											X						
Jt	2036 Prince Albert,Riv,CA							X							X											X						

For additional assets and unearned income, use next page.

SCHEDULE V — LIABILITIES

Report liabilities of over $10,000 owed to any one creditor ***at any time*** during the reporting period by you, your spouse, or dependent child. Mark the highest amount owed during the year. **Exclude:** Any mortgage on your personal residence (unless it is rented out); loans secured by automobiles, household furniture, or appliances, and liabilities owed to a spouse, or the child, parent, or sibling of you or your spouse. Report ***revolving charge accounts*** only if the balance at the end of the reporting period exceeded $10,000.[1]

SP, DC, JT	Creditor	Type of Liability	Amount of Liability									
			B $10,001–$15,000	C $15,001–$50,000	D $50,001–$100,000	E $100,001–$250,000	F $250,001–$500,000	G $500,001–$1,000,000	H $1,000,001–$5,000,000	I $5,000,001–$25,000,000	J $25,000,001–$50,000,000	K Over $50,000,000
	Example: First Bank of Wilmington, Delaware	Mortgage on 123 Main St., Dover, Del				X						
	Congressional Fed Credit Union	Visa/line of credit		X								
	Sumitomo Bank	Mortgage-2695 Spruce,SB,CA			X							
	Capstead Mortgage	Mortgage-2036 Prince Albert Riv. CA				X						

SCHEDULE VI — GIFTS

Report the source, a brief description, and the value of all gifts totalling more than $250 received by you, your spouse, or a dependent child from any source during the year

Exclude: Gifts from relatives, gifts of personal hospitality of an individual, local meals, and gifts to a spouse or dependent child that are totally independent of his or her relationship to you. Gifts with a value of $100 or less need not be added towards the $250 disclosure threshold.

Note: The gift rule (House Rule 51) prohibits gifts except as specifically provided in the rule.

Source	Description	Value
Example: Mr. Joseph H. Smith, Anytown, Anystate	Silver Platter (determination on personal friendship received from Committee on Standards)	$270
ASME (American Society of Mechanical Engineers)	Ralph Coates Roe Award(Com on Standards waiver granted 5-29-97)	10,000

Use additional sheets if more space is required.

SCHEDULE VII —TRAVEL PAYMENTS AND REIMBURSEMENTS

Identify the source and list travel itinerary, dates, and nature of expenses provided for travel and travel-related expenses totalling more than $250 received by you, your spouse, or a dependent child during the reporting period. Indicate whether a family member accompanied the traveler at the sponsor's expense, and the amount of time, if any, that was not at the sponsor's expense. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor.

Exclude: Travel-related expenses provided by federal, state, and local governments, or by a foreign government required to be separately reported under the Foreign Gifts and Decorations Act (5 U.S.C. § 7342); travel paid for by a Federal political committee; travel provided to a spouse or dependent child that is totally independent of his or her relationship to you.

Source	Date(s)	Point of Departure—Destination—Point of Return	Lodging? (Y/N)	Food? (Y/N)	Was a Family Member Included? (Y/N)	Any time not at sponsor's expense
Examples: Chicago Chamber of Commerce	Mar. 2	Wash., D.C.—Chicago—Wash., D.C.	N	N	N	N
Roycroft Corporation	Aug. 6–13	Wash., D.C.—Los Angeles—Cleveland	Y	Y	Y	4 Days
The Pittsburg Conference	March 15-17	Wash DC-Atlanta-Washington	y	y		
Brown University	Sept 19	Wash DC-Rhode Island-Wash DC				
ASME	Nov 19-20	Ont CA-Dallas Tx-Ont CA	y	y	y	
CA Credit Union League	Nov 20-21	Ont CA-SF CA-Ont. CA	y	y	y	

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UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1997

FORM A
For use by Members, officers, and employees

(5)

Sherrod Brown
(Full Name)

2625 E. Erie
Lorain OH 44052
(Mailing Address)

Daytime Telephone 202/225-3401

MC HAND DELIVERED
(Office Use Only)

Filer Status [X] Member of the U.S. House of Representatives — State OH, District 13 — [ ] Officer or Employee — Employing Office

Report Type [X] Annual (May 15) — [ ] Amendment — [ ] Termination — Termination Date

A *$200 penalty* shall be assessed against anyone who files more than 30 days late.

PRELIMINARY INFORMATION — ANSWER EACH OF THESE QUESTIONS

I Did you or your spouse have "earned" income (e.g., salaries or fees) of $200 or more from any source in the reporting period?
If yes, complete and attach Schedule I. Yes [ ] No [X]

II Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period?
If yes, complete and attach Schedule II. Yes [X] No [ ]

III Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period?
If yes, complete and attach Schedule III. Yes [X] No [ ]

IV Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset worth more than $1,000 in the reporting period?
If yes, complete and attach Schedule IV. Yes [ ] No [X]

V Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period?
If yes, complete and attach Schedule V. Yes [ ] No [X]

VI Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $250 and not otherwise exempt)?
If yes, complete and attach Schedule VI. Yes [ ] No [X]

VII Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $250 from one source)?
If yes, complete and attach Schedule VII. Yes [X] No [ ]

VIII Did you hold any reportable positions on or before the date of filing in the current calendar year?
If yes, complete and attach Schedule VIII. Yes [ ] No [X]

IX Did you have any reportable agreement or arrangement with an outside entity?
If yes, complete and attach Schedule IX. Yes [ ] No [X]

Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION — ANSWER EACH OF THESE QUESTIONS

TRUSTS—Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child? Yes [ ] No [X]

EXEMPTION—Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption? Yes [ ] No [X]

CERTIFICATION — THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended. The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct or its designee. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil penalties and criminal sanctions (*See* 5 U.S.C. app. 4, §104 and 18 U.S.C. §1001)

SIGNATURE OF REPORTING INDIVIDUAL Sherrod Brown

DATE (Month/Day/Year) May 6, 1998

Name Sherrod Brown	Page ___ of ___

SCHEDULE II — PAYMENTS IN LIEU OF HONORARIA MADE TO CHARITY

List the source, activity (i.e., speech, appearance, or article), date, and amount of any payment made by the sponsor of an event to a charitable organization in lieu of an honorarium. A separate confidential list of charities receiving such payments must be filed directly with the Committee on Standards of Official Conduct. An envelope for transmitting the list is included in each Member's filing package.

Source	Activity	Date	Amount
Examples: Association of American Associations, Wash., D.C.	Speech	Feb. 2, 1997	$2,000
XYZ Magazine	Article	Aug. 13, 1997	$500
Nonprescription Drug Manuf., Wash DC	speech	March 18, 1997	1,000
Am Soc of Anesthesiologists, Wash DC	speech	April 15, 1997	1,500

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Name Sherrod Brown | Page of

SCHEDULE III — ASSETS AND "UNEARNED" INCOME

BLOCK A — Asset and/or Income Source

Identify (a) each asset held for investment or production of income with a fair market value exceeding $1,000 at the end of the reporting year, and (b) any other asset or source of income which generated more than $200 in "unearned" income during the year. For rental property or land, provide an address. Provide full names of any mutual funds. For an IRA or retirement plan that is *self-directed*, list the underlying assets worth more than $1,000. For an IRA or retirement plan that is not selfdirected, name the institution holding the account.

Exclude: Your personal residence(s) (unless there is rental income); any debt owed to you by your spouse, or by your or your spouse's child, parent, or sibling; any deposits totalling $5,000 or less in personal savings accounts; any financial interests in or income derived from U.S. Government retirement programs.

If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC) or is jointly held (JT), in the optional column on the far left

BLOCK B — Value of Asset

at close of reporting year.
If you use a valuation method other than fair market value, please specify the method used
If an asset was sold and is included only because it generated income, the value should be "None."

BLOCK C — Type of Income

BLOCK D — Amount of Income

For IRA's and retirement plans that are *not* self-directed, you may write in "NA" for income

BLOCK E — Transaction

Indicate if asset was purchased (P), sold (S), or exchanged (E) in reporting year

			Block A	Block B													Block C								Block D										Block E
				A None	B $1 – $1,000	C $1,001 – $15,000	$15,001 – $50,000	E $50,001 – $100,000	F $100,001 – $250,000	G $250,001 – $500,000	H $500,001 – $1,000,000	I $1,000,001 – $5,000,000	J $5,000,001 – $25,000,000	K $25,000,001 – $50,000,000	L Over $50,000,000	DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Type of Income (Specify For Example: Partnership Income or Farm Income)	I None	II $1 – $200	III $201 – $1,000	IV $1,001 – $2,500	V $2,501 – $5,000	VI $5,001 – $15,000	VII $15,001 – $50,000	VIII $50,001 – $100,000	IX $100,001 – $1,000,000	X $1,000,001 – $5,000,000	XI Over $5,000,000	
SP, DC, JT	*Examples:*	SP	Mega Corp Stock					X								X																			P, S, E
			Simon & Schuster		Indefinite													X				Royalties													P
			1st Bank of Paducah, KY accounts						X																	X					X				
	Brown Lea Farm OH					X										X									X									
	OH PERS					X											X								N/A									
	Nationwide (State PEE)						X								X										N/A									
	Calvert Fund				X										X								X											
	Ariel Mutual * (split fr Calvert)				X										X									X										

For additional assets and unearned income, use next page.

SCHEDULE III — ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Name Sherrod Brown | Page of

SP, DC, JT	BLOCK A Asset and/or Income Source	BLOCK B Year-End Value of Asset											BLOCK C Type of Income							BLOCK D Amount of Income										BLOCK E Transaction
		A None	B $1 – $1,000	C $1,001 – $15,000	D $15,001 – $50,000	E $50,001 – $100,000	F $100,001 – $250,000	G $250,001 – $500,000	H $500,001 – $1,000,000	I $1,000,001 – $5,000,000	J $5,000,001 – $25,000,000	K $25,000,001 – $50,000,000	L Over $50,000,000	DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Type of Income (Specify)	I None	II $1 – $200	III $201 – $1,000	IV $1,001 – $2,500	V $2,501 – $5,000	VI $5,001 – $15,000	VII $15,001 – $50,000	VIII $50,001 – $100,000	IX $100,001 – $1,000,000	X $1,000,001 – $5,000,000	XI Over $5,000,000	P, S, E
	Bramwell				X									X									X							
	AmSouth - 20th Century				X									X									X							
	Fidelity Mutual IRA			X												X							X							
	Navellier Fund			X										X										X						

This page may be copied if more space is required.

Name Sherrod Brown | Page of

SCHEDULE VII —TRAVEL PAYMENTS AND REIMBURSEMENTS

Identify the source and list travel itinerary, dates, and nature of expenses provided for travel and travel-related expenses totalling more than $250 received by you, your spouse, or a dependent child during the reporting period. Indicate whether a family member accompanied the traveler at the sponsor's expense, and the amount of time, if any, that was not at the sponsor's expense. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor.

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Source	Date(s)	Point of Departure—Destination—Point of Return	Lodging? (Y/N)	Food? (Y/N)	Was a Family Member Included? (Y/N)	Any time not at sponsor's expense
Examples: Chicago Chamber of Commerce	Mar. 2	Wash., D.C.—Chicago—Wash., D.C.	N	N	N	N
Roycroft Corporation	Aug. 6–13	Wash., D.C.—Los Angeles—Cleveland	Y	Y	Y	4 Days
Natl Jewish Dem Council	2-25-97	DC - Clev - DC	N	Y	N	N
Am Isr Education Foundation	5-24→30	Cle - Tel Aviv - Cle	Y	Y	N	N

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UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1997

FORM A
For use by Members, officers, and employees

98 MAY 13 PM 1:03

OFFICE OF THE CLERK
U.S. HOUSE OF REPRESENTATIVES

Edward G. BRYANT
(Full Name)

430 Garland Road
(Mailing Address)

202-225-2811
Daytime Telephone

HAND DELIVERED
MC
(Office Use Only)

(6)

Filer Status	[X] Member of the U.S. House of Representatives	State: TN District: 07	[ ] Officer or Employee	Employing Office:
Report Type	[X] Annual (May 15)	[ ] Amendment	[ ] Termination	Termination Date:

A *$200 penalty* shall be assessed against anyone who files more than 30 days late.

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If yes, complete and attach Schedule III. Yes [X] No [ ]

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If yes, complete and attach Schedule VII. Yes [X] No [ ]

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If yes, complete and attach Schedule VIII. Yes [ ] No [X]

IX Did you have any reportable agreement or arrangement with an outside entity?
If yes, complete and attach Schedule IX. Yes [ ] No [X]

Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION — ANSWER EACH OF THESE QUESTIONS

TRUSTS—Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child? Yes [ ] No [X]

EXEMPTION—Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption? Yes [ ] No [X]

CERTIFICATION — THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended. The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct or its designee. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil penalties and criminal sanctions (*See* 5 U.S.C. app. 4, §104 and 18 U.S.C. §1001).

SIGNATURE OF REPORTING INDIVIDUAL: Edward G. Bryant

DATE (Month/Day/Year): May 7, 1998

Name Edward G. Bryant | Page 1 of #5

SCHEDULE III — ASSETS AND "UNEARNED" INCOME

BLOCK A — Asset and/or Income Source

Identify (a) each asset held for investment or production of income with a fair market value exceeding $1,000 at the end of the reporting year, and (b) any other asset or source of income which generated more than $200 in "unearned" income during the year. For rental property or land, provide an address. Provide full names of any mutual funds. For an IRA or retirement plan that is *self-directed*, list the underlying assets worth more than $1,000. For an IRA or retirement plan that is not self-directed, name the institution holding the account.

Exclude: Your personal residence(s) (unless there is rental income), any debt owed to you by your spouse, or by your or your spouse's child, parent, or sibling, any deposits totalling $5,000 or less in personal savings accounts, any financial interests in or income derived from U.S. Government retirement programs.

If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC) or is jointly held (JT), in the optional column on the far left.

SP		SP	Mega Corp. Stock
DC	*Examples*		Simon & Schuster
JT			1st Bank of Paducah, KY accounts

BLOCK B — Value of Asset

at close of reporting year.
If you use a valuation method other than fair market value, please specify the method used. If an asset was sold and is included only because it generated income, the value should be "None."

	A None	B $1 – $1,000	C $1,001 – $15,000	$15,001 – $50,000	E $50,001 – $100,000	F $100,001 – $250,000	G $250,001 – $500,000	H $500,001 – $1,000,000	I $1,000,001 – $5,000,000	J $5,000,001 – $25,000,000	K $25,000,001 – $50,000,000	L Over $50,000,000
Examples			Indefinite		X							
						X						

BLOCK C — Type of Income

	DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Type of Income (Specify. For Example: Partnership Income or Farm Income)
Examples	X						Royalties
			X				

BLOCK D — Amount of Income

For IRA's and retirement plans that are *not* self-directed, you may write in "NA" for income.

	I None	II $1 – $200	III $201 – $1,000	IV $1,001 – $2,500	V $2,501 – $5,000	VI $5,001 – $15,000	VII $15,001 – $50,000	VIII $50,001 – $100,000	IX $100,001 – $1,000,000	X $1,000,001 – $5,000,000	XI Over $5,000,000
Examples				X							
						X			X		

BLOCK E — Transaction

Indicate if asset was purchased (P), sold (S), or exchanged (E) in reporting year.

Examples: P, S, E, P

		A	B	C	E	F	G	H	I	J	K	L	DIV	RENT	INT	CAP	EXC	QBT	Other	I	II	III	IV	V	VI	VII	VIII	IX	X	XI	Block E
JT	Money Market Account Volunteer Bank - Jackson, TN				X										X							X									
	IRA - Cert. of Deposit Volunteer Bank				X										X								X								
SP	IRA - Cert. of Deposit Volunteer Bank			X											X						X										
DC	U.S. Savings Bonds			X											X							X									
DC	Mutual Fund Account USAA Investment - San Antonio, TX			X									X									X									P

For additional assets and unearned income, use next page.

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Name Edward G. BRYANT | Page 2 of 5

SCHEDULE III — ASSETS AND "UNEARNED" INCOME

BLOCK A — Asset and/or Income Source

Identify (a) each asset held for investment or production of income with a fair market value exceeding $1,000 at the end of the reporting year, and (b) any other asset or source of income which generated more than $200 in "unearned" income during the year. For rental property or land, provide an address. Provide full names of any mutual funds. For an IRA or retirement plan that is *self-directed*, list the underlying assets worth more than $1,000. For an IRA or retirement plan that is not self-directed, name the institution holding the account.

Exclude: Your personal residence(s) (unless there is rental income), any debt owed to you by your spouse, or by your or your spouse's child, parent, or sibling, any deposits totalling $5,000 or less in personal savings accounts, any financial interests in or income derived from U.S. Government retirement programs.

If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC) or is jointly held (JT), in the optional column on the far left.

BLOCK B — Value of Asset

at close of reporting year. If you use a valuation method other than fair market value, please specify the method used. If an asset was sold and is included only because it generated income, the value should be "None."

BLOCK C — Type of Income

BLOCK D — Amount of Income

For IRA's and retirement plans that are *not* self-directed, you may write in "NA" for income.

BLOCK E — Transaction

Indicate if asset was purchased (P), sold (S), or exchanged (E) in reporting year.

	BLOCK A	BLOCK B												BLOCK C							BLOCK D											BLOCK E
		A None	B $1 – $1,000	C $1,001 – $15,000	$15,001 – $50,000	E $50,001 – $100,000	F $100,001 – $250,000	G $250,001 – $500,000	H $500,001 – $1,000,000	I $1,000,001 – $5,000,000	J $5,000,001 – $25,000,000	K $25,000,001 – $50,000,000	L Over $50,000,000	DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Type of Income (Specify. For Example, Partnership Income or Farm Income)	I None	II $1 – $200	III $201 – $1,000	IV $1,001 – $2,500	V $2,501 – $5,000	VI $5,001 – $15,000	VII $15,001 – $50,000	VIII $50,001 – $100,000	IX $100,001 – $1,000,000	X $1,000,001 – $5,000,000	XI Over $5,000,000	P, S, E
SP																															
DC	*Examples*		Indefinite			X								X						Royalties					X			X			P
JT						X										X										X					
JT	U.S. Savings Bonds 1699 Hollywood Place Jackson, TN			X		X										X								X							P

For additional assets and unearned income, use next page.

Name Edward G Bryant | Page 3 of 45

SCHEDULE IV — TRANSACTIONS

Report any purchase, sale, or exchange by you, your spouse, or dependent child during the reporting year of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child, or the purchase or sale of your personal residence, unless it is rented out.

SP, DC, JT	Asset	Type of Transaction			Date	Amount of Transaction									
		PURCHASE	SALE	EXCHANGE	(MO/DAY/YR)	B $1,001–$15,000	C $15,001–$50,000	D $50,001–$100,000	E $100,001–$250,000	F $250,001–$500,000	G $500,001–$1,000,000	H $1,000,001–$5,000,000	I $5,000,001–$25,000,000	J $25,000,001–$50,000,000	K Over $50,000,000
SP	*Example* Mega Corporation Common Stock	X			10–12–97		X								
DC	Mutual Fund USAA Investment	X			3-4-97	X									
JT	1699 Hollywood - Jackson, TN	X			11-4-97		X								

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SCHEDULE V — LIABILITIES

Report liabilities of over $10,000 owed to any one creditor ***at any time*** during the reporting period by you, your spouse, or dependent child. Mark the highest amount owed during the year. **Exclude:** Any mortgage on your personal residence (unless it is rented out), loans secured by automobiles, household furniture, or appliances, and liabilities owed to a spouse, or the child, parent, or sibling of you or your spouse. Report ***revolving charge accounts*** only if the balance at the end of the reporting period exceeded $10,000.

SP, DC, JT	Creditor	Type of Liability	Amount of Liability									
			B $10,001–$15,000	C $15,001–$50,000	D $50,001–$100,000	E $100,001–$250,000	F $250,001–$500,000	G $500,001–$1,000,000	H $1,000,001–$5,000,000	I $5,000,001–$25,000,000	J $25,000,001–$50,000,000	K Over $50,000,000
	Example. First Bank of Wilmington, Delaware	Mortgage on 123 Main St., Dover, Del				X						
JT	The Bank of Jackson, Jackson, TN	Mortgage on 1169 Hollywood	X									

SCHEDULE VI — GIFTS

Report the source, a brief description, and the value of all gifts totalling more than $250 received by you, your spouse, or a dependent child from any source during the year.

Exclude: Gifts from relatives, gifts of personal hospitality of an individual, local meals, and gifts to a spouse or dependent child that are totally independent of his or her relationship to you. Gifts with a value of $100 or less need not be added towards the $250 disclosure threshold.

Note: The gift rule (House Rule 51) prohibits gifts except as specifically provided in the rule.

Source	Description	Value
Example. Mr. Joseph H. Smith, Anytown, Anystate	Silver Platter (determination on personal friendship received from Committee on Standards)	$270

Use additional sheets if more space is required.

Name	Edward G. Bryant	Page 45 of 45

SCHEDULE VII —TRAVEL PAYMENTS AND REIMBURSEMENTS

Identify the source and list travel itinerary, dates, and nature of expenses provided for travel and travel-related expenses totalling more than $250 received by you, your spouse, or a dependent child during the reporting period. Indicate whether a family member accompanied the traveler at the sponsor's expense, and the amount of time, if any, that was not at the sponsor's expense. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor.

Exclude: Travel-related expenses provided by federal, state, and local governments, or by a foreign government required to be separately reported under the Foreign Gifts and Decorations Act (5 U.S.C. § 7342); travel paid for by a Federal political committee; travel provided to a spouse or dependent child that is totally independent of his or her relationship to you.

Source	Date(s)	Point of Departure—Destination—Point of Return	Lodging? (Y/N)	Food? (Y/N)	Was a Family Member Included? (Y/N)	Any time not at sponsor's expense
Examples: Chicago Chamber of Commerce	Mar. 2	Wash., D.C.—Chicago—Wash., D.C.	N	N	N	N
Roycroft Corporation	Aug. 6–13	Wash., D.C.—Los Angeles—Cleveland	Y	Y	Y	4 Days
American Israel Education Foundation	Jan 9-17	Washington D.C. - Jerusalem Tel Aviv	Y	Y	Y	N

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UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1997

FORM A
For use by Members, officers, and employees

RECEIVED
93 MAY 12 PM 2:18
OFFICE OF THE CLERK
HOUSE OF REPRESENTATIVES

mc (13)

HAND DELIVERED
(Office Use Only)

Jim Bunning
(Full Name)

4 Fairway Drive
(Mailing Address)

Southgate, KY 41071-3022

Daytime Telephone
606-341-2602

Filer Status
[X] Member of the U.S. House of Representatives — State: KY District: 04
[ ] Officer or Employee — Employing Office

Report Type
[X] Annual (May 15)
[ ] Amendment
[ ] Termination — Termination Date:

A *$200 penalty* shall be assessed against anyone who files more than 30 days late.

PRELIMINARY INFORMATION — ANSWER EACH OF THESE QUESTIONS

I. Did you or your spouse have "earned" income (e.g., salaries or fees) of $200 or more from any source in the reporting period? **If yes, complete and attach Schedule I.** — Yes [X] No [ ]

II. Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? **If yes, complete and attach Schedule II.** — Yes [X] No [ ]

III. Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? **If yes, complete and attach Schedule III.** — Yes [X] No [ ]

IV. Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset worth more than $1,000 in the reporting period? **If yes, complete and attach Schedule IV.** — Yes [X] No [ ]

V. Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? **If yes, complete and attach Schedule V.** — Yes [X] No [ ]

VI. Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $250 and not otherwise exempt)? **If yes, complete and attach Schedule VI.** — Yes [ ] No [X]

VII. Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $250 from one source)? **If yes, complete and attach Schedule VII.** — Yes [X] No [ ]

VIII. Did you hold any reportable positions on or before the date of filing in the current calendar year? **If yes, complete and attach Schedule VIII.** — Yes [ ] No [X]

IX. Did you have any reportable agreement or arrangement with an outside entity? **If yes, complete and attach Schedule IX.** — Yes [ ] No [X]

Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION — ANSWER EACH OF THESE QUESTIONS

TRUSTS—Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child? — Yes [ ] No [X]

EXEMPTION—Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption? — Yes [ ] No [X]

CERTIFICATION — THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended. The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct or its designee. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil penalties and criminal sanctions (*See* 5 U.S.C. app. 4, §104 and 18 U.S.C. §1001).

SIGNATURE OF REPORTING INDIVIDUAL: Jim Bunning

DATE (Month/Day/Year): 5/12/98

SCHEDULE I — EARNED INCOME

List the source, type, and amount of earned income from any source (other than the filer's current employment by the U.S. Government) totalling $200 or more during the preceding calendar year. For a spouse, list the source and amount of any honoraria; list only the source for other spouse earned income exceeding $1,000.

Source	Type	Amount
Examples: Keene State	Approved Teaching Fee	$6,000
State of Maryland	Legislative Pension	$9,000
Civil War Roundtable (Oct. 2nd)	Spouse Speech	$1,000
Ontario County Board of Education	Spouse Salary	NA
Bob Allen Adv. Inc. 2790 N. Menomonee River Pky., Milwaukee WI 53222	Autograph Session	$6,000.00
David Boudouin 152 Tuckohoe Drive, Shelton, CT 06484	Autograph Session	6,000.00
Dick Gordon, Rosemont, IL	Autograph Session	6,000.00
Photo File Inc., New York, New York	Royalties	522.69

For payments to charity in lieu of honoraria, use Schedule II.

SCHEDULE II — PAYMENTS IN LIEU OF HONORARIA MADE TO CHARITY

List the source, activity (i.e., speech, appearance, or article), date, and amount of any payment made by the sponsor of an event to a charitable organization in lieu of an honorarium. A separate confidential list of charities receiving such payments must be filed directly with the Committee on Standards of Official Conduct. An envelope for transmitting the list is included in each Member's filing package.

Source *Examples:* Association of American Associations, Wash., D.C. XYZ Magazine	Activity Speech Article	Date Feb 2, 1997 Aug 13, 1997	Amount $2,000 $500
St. Anthony Sports Banquet, Wilmington, DE	Speech	02/06/97	$1,000.00
The Tobacco Institute, Washington, DC	Speech	02/11/97	2,000.00
National Pastime Productions, New York, NY	Autograph Baseballs	04/23/97	2,000.00
National Pastime Productions, New York, NY	Autograph Baseballs	04/23/97	1,000.00
National Pastime Productions, New York, NY	Autograph Baseballs	04/23/97	1,000.00
National Pastime Productions, New York, NY	Autograph Baseballs	04/23/97	1,000.00
National Pastime Productions, New York, NY	Autograph Baseballs	04/23/97	700.00
National Roofers, Washington, D.C.	Speech	10/15/97	2,000.00
***Enclosed also is the financial statement of			
the Jim Bunning Foundation, which has been			
approved by the Ethics Committee and the Internal			
Revenue Service (501C3)			

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Name Jim Bunning | Page 4 of 9

SCHEDULE III — ASSETS AND "UNEARNED" INCOME

BLOCK A — Asset and/or Income Source

Identify (a) each asset held for investment or production of income with a fair market value exceeding $1,000 at the end of the reporting year, and (b) any other asset or source of income which generated more than $200 in "unearned" income during the year. For rental property or land, provide an address. Provide full names of any mutual funds. For an IRA or retirement plan that is *self-directed*, list the underlying assets worth more than $1,000. For an IRA or retirement plan that is not self-directed, name the institution holding the account.

Exclude: Your personal residence(s) (unless there is rental income), any debt owed to you by your spouse, or by your or your spouse's child, parent, or sibling, any deposits totalling $5,000 or less in personal savings accounts, any financial interests in or income derived from U.S. Government retirement programs.

If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC) or is jointly held (JT), in the optional column on the far left.

BLOCK B — Value of Asset

at close of reporting year.
If you use a valuation method other than fair market value, please specify the method used.
If an asset was sold and is included only because it generated income, the value should be "None."

BLOCK C — Type of Income

BLOCK D — Amount of Income

For IRA's and retirement plans that are *not* self-directed, you may write in "NA" for income.

BLOCK E — Transaction

Indicate if asset was purchased (P), sold (S), or exchanged (E) in reporting year.

	BLOCK A	A None	B $1 – $1,000	C $1,001 – $15,000	D $15,001 – $50,000	E $50,001 – $100,000	F $100,001 – $250,000	G $250,001 – $500,000	H $500,001 – $1,000,000	I $1,000,001 – $5,000,000	J $5,000,001 – $25,000,000	K $25,000,001 – $50,000,000	L Over $50,000,000	DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Type of Income (Specify For Example, Partnership Income or Farm Income)	I None	II $1 – $200	III $201 – $1,000	IV $1,001 – $2,500	V $2,501 – $5,000	VI $5,001 – $15,000	VII $15,001 – $50,000	VIII $50,001 – $100,000	IX $100,001 – $1,000,000	X $1,000,001 – $5,000,000	XI Over $5,000,000	BLOCK E
SP						X								X																	P
DC	*Examples*			Indefinite																Royalties											
JT							X									X										X					
	Equitable Life Assurance								X											Pension							X				
	Fidelity Equity Income Fund				X															Pay Out						X					
	Deferred compensation from State Senate 1983																														
	Host Communication Stock						X													None						None					
	Citizens Bank of Campbell County Ky.				X											X				Interest			X								

For additional assets and unearned income, use next page.

SCHEDULE III — ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Name: Jim Bunning

SP. DC. JT	BLOCK A Asset and/or Income Source	BLOCK B Year-End Value of Asset											BLOCK C Type of Income							BLOCK D Amount of Income										BLOCK E Transaction
		A None	B $1 - $1,000	C $1,001 - $15,000	D $15,001 - $50,000	E $50,001 - $100,000	F $100,001 - $250,000	G $250,001 - $500,000	H $500,001 - $1,000,000	I $1,000,001 - $5,000,000	J $5,000,001 - $25,000,000	K $25,000,001 - $50,000,000	L Over $50,000,000	DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Type of Income (Specify)	I None	II $1 - $200	III $201 - $1,000	IV $1,001 - $2,500	V $2,501 - $5,000	VI $5,001 - $15,000	VII $15,001 - $50,000	VIII $50,001 - $100,000	IX $100,001 - $1,000,000	X $1,000,001 - $5,000,000	XI Over $5,000,000	P. S. E
	Comair Holdings																													
	4125 Shares																													
	11/15/97 3 for 2 Split																													
	6187 Shares Comair						X							X									X							
	IRA Rollover - Comair Holdings 1575																													
	11/15/97 3 for 2 Split																													
	2363 Shares Comair				X									X									X							
	250 Meta Creations Corp			X																	X									P
	875 Rebox Tech Corp			X																	X									P
	400 Meta Creations Corp			X																	X									P
	Legg Mason Reserved Trust				X																	X								

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SCHEDULE IV — TRANSACTIONS

Name: Jim Bunning

SP, DC, JT	Asset	Type of Transaction: PURCHASE	SALE	EXCHANGE	Date (MO/DAY/YR)	Amount of Transaction: B $1,001–$15,000	C $15,001–$50,000	D $50,001–$100,000	E $100,001–$250,000	F $250,001–$500,000	G $500,001–$1,000,000	H $1,000,001–$5,000,000	I $5,000,001–$25,000,000	J $25,000,001–$50,000,000	K Over $50,000,000
SP	*Example* Mega Corporation Common Stock	X			10-12-97		X								
	Comair Holdings - 1000 Shares		X		01/10/97		X								
	Comair Holdings - 1000 Shares		X		01/13/97		X								
	Comair Holdings - 1187 Shares		X		11/17/97		X								
	Meta Creations Corp - 250 Shares	X			07/13/97	X									
	Rebox Tech Corp - 875 Shares	X			06/10/97		X								
	Meta Creations Corp - 400 Shares	X			07/13/97		X								

This page may be copied if more space is required.

Name	Jim Bunning	Page 7 of 9

SCHEDULE V — LIABILITIES

Report liabilities of over $10,000 owed to any one creditor ***at any time*** during the reporting period by you, your spouse, or dependent child. Mark the highest amount owed during the year. **Exclude:** Any mortgage on your personal residence (unless it is rented out), loans secured by automobiles, household furniture, or appliances, and liabilities owed to a spouse, or the child, parent, or sibling of you or your spouse. Report ***revolving charge accounts*** only if the balance at the end of the reporting period exceeded $10,000.

SP, DC, JT	Creditor	Type of Liability	Amount of Liability									
			B $10,001 – $15,000	C $15,001 – $50,000	D $50,001 – $100,000	E $100,001 – $250,000	F $250,001 – $500,000	G $500,001 – $1,000,000	H $1,000,001 – $5,000,000	I $5,000,001 – $25,000,000	J $25,000,001 – $50,000,000	K Over $50,000,000
Example	First Bank of Wilmington, Delaware	Mortgage on 123 Main St., Dover, Del				X						
	Citizens Bank of Campbell Co. Ky.	Line of Credit		X								

SCHEDULE VI — GIFTS

Report the source, a brief description, and the value of all gifts totalling more than $250 received by you, your spouse, or a dependent child from any source during the year.

Exclude: Gifts from relatives, gifts of personal hospitality of an individual, local meals, and gifts to a spouse or dependent child that are totally independent of his or her relationship to you. Gifts with a value of $100 or less need not be added towards the $250 disclosure threshold.

Note: The gift rule (House Rule 51) prohibits gifts except as specifically provided in the rule.

Source	Description	Value
Example Mr. Joseph H. Smith, Anytown, Anystate	Silver Platter (determination on personal friendship received from Committee on Standards)	$270
None		

Use additional sheets if more space is required.

Name	Jim Bunning	Page 8 of 9

SCHEDULE VII —TRAVEL PAYMENTS AND REIMBURSEMENTS

Identify the source and list travel itinerary, dates, and nature of expenses provided for travel and travel-related expenses totalling more than $250 received by you, your spouse, or a dependent child during the reporting period. Indicate whether a family member accompanied the traveler at the sponsor's expense, and the amount of time, if any, that was not at the sponsor's expense. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor.

Exclude: Travel-related expenses provided by federal, state, and local governments, or by a foreign government required to be separately reported under the Foreign Gifts and Decorations Act (5 U.S.C. § 7342); travel paid for by a Federal political committee; travel provided to a spouse or dependent child that is totally independent of his or her relationship to you.

Source	Date(s)	Point of Departure—Destination—Point of Return	Lodging? (Y/N)	Food? (Y/N)	Was a Family Member Included? (Y/N)	Any time not at sponsor's expense
Examples						
Chicago Chamber of Commerce	Mar. 2	Wash., D.C.—Chicago—Wash., D.C.	N	N	N	N
Roycroft Corporation	Aug. 6–13	Wash., D.C.—Los Angeles—Cleveland	Y	Y	Y	4 Days
Bob Allen Adv. Inc.	02/09/97	Cincy.-NY-Cincy.	N	N	N	N
Dave Boudouin	04/19/97	Cincy.-NY-Cincy.	N	N	N	N
Dick Gordon	05/15/97	Cincy.-Chicago-Cincy.	N	N	N	N
Baseball Hall of Fame	8/4-5/97	Wash. DC-Cooperstown, NY- Cincy.	Y	Y	Y-Spouse	N
***Enclosed also is the financial statement of the Jim Bunning Foundation, which has been approved by the Ethics Committee and the Internal Revenue Service (501C3).						

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SCHEDULE VIII — POSITIONS

Report all positions, compensated or uncompensated, held during the current calendar year as an officer, director, trustee of an organization, partner, proprietor, representative, employee, or consultant of any corporation, firm, partnership, or other business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States.

Exclude: Positions held in any religious, social, fraternal, or political entities; positions solely of an honorary nature; and positions listed on Schedule I.

Position	Name of Organization
None	None

SCHEDULE IX — AGREEMENTS

Identify the date, parties to, and general terms of any agreement or arrangement with respect to: future employment; a leave of absence during the period of government service; continuation or deferral of payments by a former or current employer other than the U.S. Government; or continuing participation in an employee welfare or benefit plan maintained by a former employer.

Date	Parties To	Terms of Agreement
	None	None

GPO 1998 46-260 (mac)

Use additional sheets if more space is required.

Jim Bunning Foundation
Statement of Position
for the year ended December 31, 1997

Revenues - Card shows and other	$48,163.06 (B)	
Interest on Citizens Bank of Campbell County	155.37	
Total Revenues		**$48,318.43**
Contributions	4,740.00 (C)	
Salary expense	2,500.00	
Payroll tax expense	212.75	
Legal expense	3,500.00	
Supplies expense	39.87 (D)	
Postage and shipping expense	32.00	
Total Expenses		**11,024.62**
Net Position		**$37,293.81**

Jim Bunning Foundation
Balance Sheet
as of December 31, 1997

Cash - Citizens Bank of Campbell County	$36,609.23	
Travel expense receivable	906.20 (A)	
Total Assets		$37,515.43
Payroll taxes payable	221.62	
Total Liabilities		$221.62
Capital - Net Position		37,293.81
Total Liabilities and Capital		$37,516.43

Jim Bunning Foundation
Notes to Financial Statements
December 31, 1997

(A) Travel expense receivable of $906.20 represents payment made by the Foundation for travel to New York City for a card show on March 1, 1998. This will be reimbursed by the promoter of the event.

(B) Detail of revenues:

9/28/97 New Jersey Show	$7,284.00
10/5/97 Detroit Show	9,388.00
10/19/97 Kansas City Show	6,460.00
11/1/97 St. Louis Show	7,024.00
12/13/97 Orlando Show	7,004.00
Topps Rookie Card Signing	5,000.00
National Baseball Hall of Fame	2,250.00
MLB Licensing Program	1,927.06
International Sports Marketing Show	1,000.00
Dick Gordon Sports	516.00
Fee Rec'd for Canceled Check	200.00
SABR Convention	100.00
Hall of Fame Postcard Autograph	10.00
	$48,163.06

Jim Bunning Foundation
Notes to Financial Statements
December 31, 1997

(C) Detail of Contributions Made:

	Total $ Sent	Less Value Rec'd	Net Contribution
St. Xavier High School	$500.00		$500.00
Wood Hudson Cancer Research	500.00		500.00
Children's Home of N. KY (Charity Ball)	340.00	140.00	200.00
The Carnegie - Art of the Body	300.00		300.00
Kids Helping Kids	250.00		250.00
NKAR (Joy to the World)	250.00	44.00	206.00
Notre Dame Academy	250.00		250.00
Women's Crisis Center	250.00		250.00
Brighton Center	200.00		200.00
Cathedral Foundation	200.00		200.00
All Saints Church	100.00		100.00
American Cancer Society	100.00		100.00
Fairhaven Rescue Mission	100.00		100.00
Highlands Athletic Boosters	100.00		100.00
KY Arts and Craft Foundation	100.00		100.00
National MS Society	100.00		100.00
NKU (Presidential Installation Dinner)	100.00	50.00	50.00
N. KY Right to Life	100.00		100.00
Redwood Holiday Appeal	100.00		100.00
Sacred Heart Church	100.00		100.00
SEMC Foundation	100.00		100.00
St. Michael Gym Project	100.00		100.00
St. Thomas Aquinas Church, Storrs, CT	100.00		100.00
The Wellness Community	100.00		100.00
United Way	100.00		100.00
YMCA-Character Awards	100.00		100.00
Scott HS Eagle Club	50.00		50.00
Sister of Charity (Jamaica Jammin')	50.00		50.00
	$4,740.00	$234.00	$4,506.00

(D) Represents cost of checkbook and initial supply of checks.

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1997

Form A
For use by Members, officers, and employees

RECEIVED
99 MAY 15 PM 5:17

Richard Mauze Burr
(Full Name)

2634 Forest Drive
(Mailing Address)

Winston-Salem NC 27104

Daytime Telephone: (202) 225-2071

HAND DELIVERED
(Office Use Only)

Filer Status	[X]	Member of the U S House of Representatives	State NC District 05	[ ]	Officer or Employee	Employing Office
Report Type	[X]	Annual (May 15)	[ ] Amendment	[ ]	Termination	Termination Date

A $200 penalty shall be assessed against anyone who files more than 30 days late.

PRELIMINARY INFORMATION -- ANSWER EACH OF THESE QUESTIONS

I Did you or your spouse have "earned" income (e g , salaries or fees) of $200 or more from any source in the reporting period? **If yes, complete and attach Schedule I.** Yes [X] No [ ]

II Did any individual or organization make a donation to charity in lieu of paying you for a speech, apppearance, or article in the reporting period? **If yes, complete and attach Schedule II.** Yes [X] No [ ]

III Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? **If yes, complete and attach Schedule III.** Yes [X] No [ ]

IV Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset worth more than $1,000 in the reporting period? **If yes, complete and attach Schedule IV.** Yes [X] No [ ]

V Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? **If yes, complete and attach Schedule V.** Yes [X] No [ ]

VI Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i e , aggregating more than $250 and not otherwise exempt)? **If yes, complete and attach Schedule VI.** Yes [ ] No [X]

VII Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $250 from one source)? **If yes, complete and attach Schedule VII.** Yes [X] No [ ]

VIII Did you hold any reportable positions on or before the date of filing in the current calendar year? **If yes, complete and attach Schedule VIII.** Yes [X] No [ ]

IX Did you have any reportable agreement or arrangement with an outside entity? **If yes, complete and attach Schedule IX.** Yes [ ] No [X]

Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION -- ANSWER EACH OF THESE QUESTIONS

TRUSTS- Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child? (See Instructions, pages 10-11) Yes [ ] No [X]

EXEMPTION Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption? (See Instructions, page 11) Yes [ ] No [X]

CERTIFICATION -- THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct or its designee Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil penalties and criminal sanctions (See 5 U S C app 4, 104 and 18 U S C 1001)

SIGNATURE OF REPORTING INDIVIDUAL

DATE (Month/Day/Year) 5/15/98

SCHEDULE I -- EARNED INCOME

List the source, type, and amount of earned income from any source (other than the filer's current employment by the U.S. Government) totalling $200 or more during the preceding calendar year. For a spouse, list the source and amount of any honoraria, list only the source for other spouse earned income exceeding $1,000. For further information, see Instructions, pages 12-13

	Source	Type	Amount
Examples	Keene State	Approved Teaching Fee	$10,000
	State of Maryland	Legislative Pension	$9,000
	Civil War Roundtable (Oct. 2nd)	Spouse Speech	$1,000
	Ontario County Board of Education	Spouse Salary	NA
	Graham and Boles Realty (wife) Winston-Salem, NC	Spouse Commission	NA

For payments to charity in lieu of honoraria, use Schedule II.

SCHEDULE II -- PAYMENTS IN LIEU OF HONORARIA MADE TO CHARITY

List the source, activity (i e , speech, appearance, or article), date, and amount of any payment made by the sponsor of an event to a charitable organization in lieu of an honorarium
A separate confidential list of charities receiving such payments must be filed directly with the Committe on Standards of Official Conduct An envelope for transmitting the list is included in each Member's filing package For further information, see Instructions, pages 13-14

Source		Activity	Date	Amount
Examples	Association of American Associations, Wash , D C	Speech	Feb 2, 1994	$2,000
	XYZ Magazine	Article	Aug 13, 1994	$500
Kmart		Participation in charitable event	12/30/[illegible]1	$ 2,000
Phillip Morris		Speaking Engagement	12/30/[illegible]1	$ 2,000
North Carolina Neurosurgical Society		Speaking Engagement	12/30/[illegible]1	$ 250

SCHEDULE III -- ASSETS AND "UNEARNED" INCOME

	BLOCK A **Asset and/or Income Source** Identify (a) each asset held for investment or production of income with a fair market value exceeding $1,000 at the end of the reporting year, and (b) any other asset or source of income which generated more than $200 in "unearned" income during the year. For rental property or land, provide an address. Provide full names of any mutual funds. For an IRA or retirement plan that is *self-directed*, list the underlying assets worth more than $1,000. For an IRA or retirement plan that is *not* self-directed, name the institution holding the account **Exclude:** Your personal residence(s) (unless there is rental income), any debt owed to you by your spouse, or by your or your spouse's child, parent, or sibling; any deposits totalling $5,000 or less in personal savings accounts; any financial interests in or income derived from U S Government retirement programs If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC) or is jointly held (JT), in the optional column on the far left For further information, see Instructions, pages 14-20	BLOCK B **Value of Asset** at close of reporting year If you use a valuation method other than fair market value, please specify the method used If an asset was sold and is included only because it generated income, the value should be "None"	BLOCK C **Type of Income** If other than one of the listed categories, specify the type of income by writing a brief description in this block	BLOCK D **Amount of Income** For IRA's and retirement plans that are *not* self-directed, you may write in "NA" for income	BLOCK E **Transaction** Indicate if asset was purchased(P), sold(S), or exchanged(E) in reporting year
SP DC *Examples* JT	SP Mega Corp Stock 123 Main St , Dover, Del 1st Bank of Paducah, KY accounts	$15,001 - $50,000 $250,001 - $500,000 $50,001 - $100,000	Dividends Rent Interest	$201 - $1,000 $1,001 - $2,500 $5,001 - $15,000	P
	625 Polo Rd , Winston-Salem, NC	$50,001 - $100,000	Rent	$5,001 - $15,000	
JT	Granvilla Apts , Hwy 158 (1/3)	$50,001 - $100,000	Rent	$5,001 - $15,000	S
SP	Sara Lee Corp stock	$1,001 - $15,000	Dividends	None - $200	
SP	Southern National stock	$1,001 - $15,000	Dividends	$201 - $1,000	
SP	US West Comm Group stock	$1,001 - $15,000	Dividends	$201 - $1,000	S
SP	US West Media Group stock	$1,001 - $15,000	Dividends	None - $200	S
SP	Goldman Sachs Equity	$1,001 - $15,000	Dividends	$201 - $1,000	
SP	Edward D Jones cash money market	$1,001 - $15,000	Interest	None - $200	
SP	Central Carolina Bank checking	None - $1,000	Interest	None - $200	

SCHEDULE III -- ASSETS AND "UNEARNED" INCOME

JT	Piedmont Federal savings	$1,001 - $15,000	Interest	None - $200	
JT	BB&T savings	$1,001 - $15,000	Interest	$201 - $1,000	
DC	Edward D Jones money market	$1,001 - $15,000	Interest	None - $200	
DC	Southern National stock	$1,001 - $15,000	Dividends	$201 - $1,000	
DC	Smallcap World Fund	$1,001 - $15,000	Dividends	$201 - $1,000	
DC	Lord Abbott Global Income	$1,001 - $15,000	Dividends	$201 - $1,000	S
	Edward D Jones money market	$1,001 - $15,000	Interest	None - $200	
	Small Cap World Fund	$1,001 - $15,000	Dividends	None - $200	S
	US West Comm Group stock	$1,001 - $15,000	Dividends	$201 - $1,000	S
	US Media Group stock	$1,001 - $15,000	Dividends	None - $200	S
	Putnam Capital Appreciation	$1,001 - $15,000	Dividends	None - $200	S
	Putnam Growth and Income Fund	$1,001 - $15,000	Dividends	$201 - $1,000	S
	Putnam New Opportunities	$1,001 - $15,000	Dividends	None - $200	S
	Putnam OTC Emerging Growth	$1,001 - $15,000	Dividends	None - $200	S
	Federal National Meeting Assn	$1,001 - $15,000	Interest	$201 - $1,000	
	Tenn. Valley Authority Bond	$1,001 - $15,000	Interest	$201 - $1,000	
SP	Graham and Boles Realty	$1,001 - $15,000	Dividends	$201 - $1,000	
DC	Lord Abbott Dev. Growth Fund	$1,001 - $15,000	Dividends	None - $200	P
	Putnam Income Fund	$15,001 - $50,000	Dividends	$2,501 - $5,000	P
	Bond Fund of America	$1,001 - $15,000	Dividends	$201 - $1,000	P

SCHEDULE IV -- TRANSACTIONS

Report any purchase, sale, or exchange by you, your spouse, or dependent child during the reporting year of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child, or the purchase or sale of your personal residence, unless it is rented out. For further information, see Instructions, pages 20-21.

SP,DC,J	Asset	Type of Transaction	Date	Amount of Transaction
Example	Mega Corporation Common Stock	Purchase	10/12/94	$15,001 - $50,000
	Granville Apts. Hwy 158	Sold	10/22/97	$50,001 - $100,000
SP	US West Media Group	Sold	1/15/97	$1,001 - $15,000
SP	US West Comm Group	Sold	1/15/97	$1,001 - $15,000
DC	Lord Abbott Global Income	Sold	1/6/97	$1,001 - $15,000
DC	Lord Abbott Dev. Growth Fund	Purchase	1/6/97	$1,001 - $15,000
	US West Media Group	Sold	1/15/97	$1,001 - $15,000
	US West Comm Group	Sold	1/15/97	$1,001 - $15,000
	Putnam Capitol Appreciation	Sold	7/30/97	$1,001 - $15,000
	Putnam Growth and Income	Sold	7/30/97	$1,001 - $15,000
	Putnam New Opportunity	Sold	7/29/97	$1,001 - $15,000
	Putnam OTC Emerging Growth	Sold	7/30/97	$1,001 - $15,000
	Bond Fund of America	Purchase	7/29/97	$1,001 - $15,000
	Putnam Income Fund	Purchase	7/30/97	$15,001 - $50,000
	Small Cap World Fund	Sold	7/29/97	$1,001 - $15,000

SCHEDULE V -- LIABILITIES

Report liabilities of over $10,000 owed to any one creditor ***at any time*** during the reporting period by you, your spouse, or dependent child. Mark the highest amount owed during the year.
Exclude: Any mortgage on your personal residence (unless it is rented out), loans secured by automobiles, household furniture, or appliances, and liabilities owed to a spouse, or the child, parent, or sibling of you or your spouse. Report ***revolving charge accounts*** only if the balance at the end of the reporting period exceeded $10,000. For further information, see Instructions, pages 21-22.

SP,DC,J	Creditor	Type of Liability	Amount of Liability
	Example: First Bank of Wilmington, Delaware	Mortgage on 123 Main St., Dover, Del	$100,001 - $250,000
	Piedmont Federal Savings	625 Polo Rd., Winston-Salem, NC	$15,001 - $50,000
JT	Central Carolina Bank (1/3 Partner)	Granvilla Apts., Hwy 158	$15,001 - $50,000

SCHEDULE VII -- TRAVEL PAYMENTS AND REIMBURSEMENTS

Identify the source and list travel itinerary, dates, and nature of expenses provided for travel and travel-related expenses totalling more than $250 received by you, your spouse, or a dependent child during the reporting period. Indicate whether a family member accompanied the traveler at the sponsor's expense, and the amount of time, if any, that was not at the sponsor's expense. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor.

Exclude: Travel-related expenses provided by federal, state and local governments, or by a foreign government required to be separately reported under the Foreign Gifts and Decorations Act (5 U.S.C. 7342); travel paid for by a Federal political committee; travel provided to a spouse or dependent child that is totally independent of his or her relationship to you. For further information, see Instructions, pages 24-26

Source	Date(s)	Point of Departure--Destination--Point of Return	Lodging? (Y/N)	Food? (Y/N)	Was a Family Member Included? (Y/N)	Any time not at sponsor's expense
Examples: Chicago Chamber of Commerce	Mar 2	Wash , D.C.-Chicago-Wash , D.C.	N	N	N	N
Mega Corporation	Aug 6-13	Wash , D.C.-Los Angeles-Cleveland	Y	Y	Y	4 Days
Healthcare Marketing & Communications Council	January 16, 1997	Washington, DC -- New York, NY--Washington, DC	N	N	N	No
International Dairy Foods Association	January 17-18, 1997	Greensboro, NC--Fort Lauderdale, FL--Greensboro, NC	Y	Y	N	No
Tobacco Institute	February 13-16, 1997	Greensboro, NC--Phoenix, AZ--Greensboro, NC	Y	Y	Y	No
University of Texas-Austin	February 24, 1997	Greensboro, NC--Austin, TX-- Washington, DC	N	N	N	No
Ripon Educational Fund	August 9-16-1997	Greensboro, NC--Prague, The Czech Republic--Greensboro, NC	Y	Y	Y	No

RICHARD BURR
5TH DISTRICT, NORTH CAROLINA
COMMITTEE
COMMERCE
SUBCOMMITTEES
HEALTH AND THE ENVIRONMENT
ENERGY AND POWER
OVERSIGHT AND INVESTIGATIONS

Congress of the United States
House of Representatives
Washington, DC 20515–3305

WASHINGTON OFFICE
1513 LONGWORTH HOB
WASHINGTON, DC 20515
(202) 225-2071
FAX (202) 225-2995
DC INFO LINE
(202) 226-0320
E MAIL: Richard.Burr.NC05@mail.house.gov
WWW: http://www.house.gov.burr/
DISTRICT OFFICE
2000 WEST FIRST STREET
SUITE 508
PIEDMONT PLAZA TWO
WINSTON-SALEM, NC 27104
(336) 631-5125
FAX (336) 725-4493

June 8, 1998

Clerk of the House
U.S. House of Representatives
Washington, DC 20515

(2)
√
MC

To Whom This May Concern:

It has come to my attention that Schedule VIII, page nine, of my 1997 Personal Financial Disclosure Form was inadvertently not included in the documents I submitted on May 15, 1998.

I apologize for the inconvenience. If you have any questions, please do not hesitate to contact me.

Sincerely,

Richard Burr
Member of Congress

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SCHEDULE VIII -- POSITIONS

Report all positions, compensated or uncompensated, held during the current calendar year as an officer, director, trustee of an organization, partner, proprietor, representative, employee, or consultant of any corporation, firm, partnership, or other business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States. For further information, see Instructions, page 26.

Exclude: Positions held in any religious, social, fraternal, or political entities, positions solely of an honorary nature, and positions listed on Schedule I.

Position	Organization
State Co-chariman	North Carolina Taxpayers United
Partner	Granville Partners
Board Member	Brenner Children's Hospital

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1997

FORM A
For use by Members, officers, and employees

98 MAY 14 PM 3:12

Danny Lee Burton
(First Name)
2185 Rayburn House Office Building
Washington, DC 20515
(Mailing Address)
(202) 225-2276
Daytime Telephone

HAND DELIVERED (10)

(Office Use Only)

Filer Status	[X] Member of the U S House of Representatives	State Indiana District 6	[ ] Officer or Employee	Employing Office
Report Type	[X] Annual (May 15)	[ ] Amendment	[ ] Termination	Termination Date

A *$200 penalty* shall be assessed against anyone who files more than 30 days late.

PRELIMINARY INFORMATION — ANSWER EACH OF THESE QUESTIONS

I	Did you or your spouse have "earned" income (e.g., salaries or fees) of $200 or more from any source in the reporting period? **If yes, complete and attach Schedule I.**	Yes [X]	No [ ]	VI Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $250 and not otherwise exempt)? **If yes, complete and attach Schedule VI.**	Yes [ ] No [X]
II	Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? **If yes, complete and attach Schedule II.**	Yes [X]	No [ ]	VII Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $250 from one source)? **If yes, complete and attach Schedule VII.**	Yes [X] No [ ]
III	Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? **If yes, complete and attach Schedule III.**	Yes [X]	No [ ]	VIII Did you hold any reportable positions on or before the date of filing in the current calendar year? **If yes, complete and attach Schedule VIII.**	Yes [X] No [ ]
IV	Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset worth more than $1,000 in the reporting period? **If yes, complete and attach Schedule IV.**	Yes [X]	No [ ]	IX Did you have any reportable agreement or arrangement with an outside entity? **If yes, complete and attach Schedule IX.**	Yes [ ] No [X]
V	Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? **If yes, complete and attach Schedule V.**	Yes [X]	No [ ]	**Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.**	

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION — ANSWER EACH OF THESE QUESTIONS

TRUSTS—Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child?	Yes [ ]	No [X]
EXEMPTION—Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption?	Yes [ ]	No [X]

CERTIFICATION — THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended. The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct or its designee. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil penalties and criminal sanctions (*See* 5 U S C app 4, §104 and 18 U S C §1001)

SIGNATURE OF REPORTING INDIVIDUAL Danny Lee Burton

DATE (Month/Day/Year) 5-14-98

SCHEDULE I — EARNED INCOME

List the source, type, and amount of earned income from any source (other than the filer's current employment by the U.S. Government) totalling $200 or more during the preceding calendar year. For a spouse, list the source and amount of any honoraria; list only the source for other spouse earned income exceeding $1,000.

	Source	Type	Amount
Examples:	Keene State	Approved Teaching Fee	$6,000
	State of Maryland	Legislative Pension	$9,000
	Civil War Roundtable (Oct 2nd)	Spouse Speech	$1,000
	Ontario County Board of Education	Spouse Salary	NA
	Burton Agency - Spouse	Commissions	N/A

For payments to charity in lieu of honoraria, use Schedule II.

Name	Danny Lee Burton	Page	3 of 10

SCHEDULE II — PAYMENTS IN LIEU OF HONORARIA MADE TO CHARITY

List the source, activity (i.e., speech, appearance, or article), date, and amount of any payment made by the sponsor of an event to a charitable organization in lieu of an honorarium. A separate confidential list of charities receiving such payments must be filed directly with the Committee on Standards of Official Conduct. An envelope for transmitting the list is included in each Member's filing package.

Source	Activity	Date	Amount
Examples Association of American Associations, Wash., D.C. / XYZ Magazine	Speech / Article	Feb. 2, 1997 / Aug. 13, 1997	$2,000 / $500
Kmart Family Foundation	Kmart Race Against Drugs Cap. Hill Chall.	Sept. 10, 1997	$500.

This page may be copied if more space is required.

SCHEDULE III — ASSETS AND "UNEARNED" INCOME

BLOCK A — Asset and/or Income Source

Identify (a) each asset held for investment or production of income with a fair market value exceeding $1,000 at the end of the reporting year, and (b) any other asset or source of income which generated more than $200 in "unearned" income during the year. For rental property or land, provide an address. Provide full names of any mutual funds. For an IRA or retirement plan that is *self-directed*, list the underlying assets worth more than $1,000. For an IRA or retirement plan that is not selfdirected, name the institution holding the account.

Exclude: Your personal residence(s) (unless there is rental income); any debt owed to you by your spouse, or by your or your spouse's child, parent, or sibling; any deposits totalling $5,000 or less in personal savings accounts; any financial interests in or income derived from U.S. Government retirement programs.

If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC) or is jointly held (JT), in the optional column on the far left.

BLOCK B — Value of Asset

at close of reporting year. If you use a valuation method other than fair market value, please specify the method used. If an asset was sold and is included only because it generated income, the value should be "None."

BLOCK C — Type of Income

BLOCK D — Amount of Income

For IRA's and retirement plans that are *not* self-directed, you may write in "NA" for income.

BLOCK E — Transaction

Indicate if asset was purchased (P), sold (S), or exchanged (E) in reporting year.

	BLOCK A	BLOCK B												BLOCK C							BLOCK D										BLOCK E
		A None	B $1 – $1,000	C $1,001 – $15,000	E $15,001 – $50,000	F $50,001 – $100,000	G $100,001 – $250,000	H $250,001 – $500,000	I $500,001 – $1,000,000	J $1,000,001 – $5,000,000	K $5,000,001 – $25,000,000	L $25,000,001 – $50,000,000	Over $50,000,000	DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Type of Income (Specify. For Example: Partnership Income or Farm Income)	I None	II $1 – $200	III $201 – $1,000	IV $1,001 – $2,500	V $2,501 – $5,000	VI $5,001 – $15,000	VII $15,001 – $50,000	VIII $50,001 – $100,000	IX $100,001 – $1,000,000	X $1,000,001 – $5,000,000	XI Over $5,000,000	P, S, E
SP, DC, JT	*Examples*																														
SP	Mega Corp Stock					X								X																	P
DC	Simon & Schuster		Indefinite																	Royalties									X		
JT	1st Bank of Paducah, KY accounts						X									X									X						
	Agnico Eagle Mines Ltd			x										x								x									
	Canyon Resources		x												None						x										
	Homestake Mining		x											x								x									
	Newmont Gold			x										x								x									
	Nuveen Mun. Mkt Oppor				x									x			x							x							
	RIBI Immunochem		x												None						x										

For additional assets and unearned income, use next page.

SCHEDULE III — ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Name: Danny Lee Burton

SP, DC, JT	BLOCK A Asset and/or Income Source	BLOCK B Year-End Value of Asset												BLOCK C Type of Income							BLOCK D Amount of Income										BLOCK E Transaction
		A None	B $1 - $1,000	C $1,001 - $15,000	D $15,001 - $50,000	E $50,001 - $100,000	F $100,001 - $250,000	G $250,001 - $500,000	H $500,001 - $1,000,000	I $1,000,001 - $5,000,000	J $5,000,001 - $25,000,000	K $25,000,001 - $50,000,000	L Over $50,000,000	DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Type of Income (Specify)	I None	II $1 - $200	III $201 - $1,000	IV $1,001 - $2,500	V $2,501 - $5,000	VI $5,001 - $15,000	VII $15,001 - $50,000	VIII $50,001 - $100,000	IX $100,001 - $1,000,000	X $1,000,001 - $5,000,000	XI Over $5,000,000	P, S, E
	Prudential Govt Sec MM				x									x									x								
	Prudential Balanced Fund				x									x			x							x							
	Prudential Intermediate Global				x									x			x							x							
	Prud. World Global Fund				x									x			x								x						
	Prudential Govt. Sec. MM		x											x								x									
SP	Prudential Balanced Fund				x									x			x								x						
SP	Prud. Intermed.Global Fund				x									x			x							x							
SP	Prud. World Global Fund				x									x			x								x						
SP	Prud. Govt Sec MM		x											x								x									

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SCHEDULE III — ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Name: Danny Lee Burton | Page 6 of 10

SP, DC, JT	BLOCK A: Asset and/or Income Source	BLOCK B: Year-End Value of Asset												BLOCK C: Type of Income							BLOCK D: Amount of Income											BLOCK E: Transaction
		A None	B $1 – $1,000	C $1,001 – $15,000	D $15,001 – $50,000	E $50,001 – $100,000	F $100,001 – $250,000	G $250,001 – $500,000	H $500,001 – $1,000,000	I $1,000,001 – $5,000,000	J $5,000,001 – $25,000,000	K $25,000,001 – $50,000,000	L Over $50,000,000	DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Type of Income (Specify)	I None	II $1 – $200	III $201 – $1,000	IV $1,001 – $2,500	V $2,501 – $5,000	VI $5,001 – $15,000	VII $15,001 – $50,000	VIII $50,001 – $100,000	IX $100,001 – $1,000,000	X $1,000,001 – $5,000,000	XI Over $5,000,000	P, S, E
	Burton Agency				x															See Schedule I											
	Harting Farm - Hancock Co						x								x									x							
	Laurel Co . KY Land (20 acres)				x										None						x										
	Residential Rental 1037 Mustang Court Franklin, IN					x									x										x						
	Residential Rentals (Dbls) 2176-2181 Galaxy Dr. Franklin, IN							y							x											x					
	Lowery Farm, IN (33.3 Acr						x								x									x							
	Country View Estates Hancock Co., IN House and Lot						x										x									x					Partial S
	Burton Ranch					x										None					x										
	Johnson Co. Land (5 acres and				x											None						None									
	Johnson Co. Land (16.84 ac						x									None						None									

SCHEDULE IV — TRANSACTIONS

Name: Danny Lee Burton

Report any purchase, sale, or exchange by you, your spouse, or dependent child during the reporting year of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child, or the purchase or sale of your personal residence, unless it is rented out.

SP, DC, JT	Asset	Type of Transaction: PURCHASE	SALE	EXCHANGE	Date (MO/DAY/YR)	Amount of Transaction: B ($1,001–$15,000)	C ($15,001–$50,000)	D ($50,001–$100,000)	E ($100,001–$250,000)	F ($250,001–$500,000)	G ($500,001–$1,000,000)	H ($1,000,001–$5,000,000)	I ($5,000,001–$25,000,000)	J ($25,000,001–$50,000,000)	K (Over $50,000,000)
SP	*Example* Mega Corporation Common Stock	X			10–12–97		X								
	Country View Estates Lot (Hancock Co.)		x		8–15–97		x								

This page may be copied if more space is required.

Name	Danny Lee Burton	Page 8 of 10

SCHEDULE V — LIABILITIES

Report liabilities of over $10,000 owed to any one creditor ***at any time*** during the reporting period by you, your spouse, or dependent child. Mark the highest amount owed during the year. **Exclude:** Any mortgage on your personal residence (unless it is rented out); loans secured by automobiles, household furniture, or appliances; and liabilities owed to a spouse, or the child, parent, or sibling of you or your spouse. Report ***revolving charge accounts*** only if the balance at the end of the reporting period exceeded $10,000.

SP, DC, JT	Creditor	Type of Liability	Amount of Liability									
			B $10,001–$15,000	C $15,001–$50,000	D $50,001–$100,000	E $100,001–$250,000	F $250,001–$500,000	G $500,001–$1,000,000	H $1,000,001–$5,000,000	I $5,000,001–$25,000,000	J $25,000,001–$50,000,000	K Over $50,000,000
	Example First Bank of Wilmington, Delaware	Mortgage on 123 Main St., Dover, Del				x						
	Citizens Bank of Central Indiana	2176-2181 Galaxy Drive Franklin, IN					x					
	Citizens Bank of Central Indiana	1037 Mustang Court Franklin, IN			x							
	Maurice and Helen Linville	16.84 acres/Johnson Co., IN				x						

SCHEDULE VI — GIFTS

Report the source, a brief description, and the value of all gifts totalling more than $250 received by you, your spouse, or a dependent child from any source during the year.

Exclude: Gifts from relatives, gifts of personal hospitality of an individual, local meals, and gifts to a spouse or dependent child that are totally independent of his or her relationship to you. Gifts with a value of $100 or less need not be added towards the $250 disclosure threshold.

Note: The gift rule (House Rule 51) prohibits gifts except as specifically provided in the rule.

Source	Description	Value
Example Mr. Joseph H. Smith, Anytown, Anystate	Silver Platter (determination on personal friendship received from Committee on Standards)	$270

Use additional sheets if more space is required.

Name	Danny Lee Burton	Page 9 of 10

SCHEDULE VII —TRAVEL PAYMENTS AND REIMBURSEMENTS

Identify the source and list travel itinerary, dates, and nature of expenses provided for travel and travel-related expenses totalling more than $250 received by you, your spouse, or a dependent child during the reporting period. Indicate whether a family member accompanied the traveler at the sponsor's expense, and the amount of time, if any, that was not at the sponsor's expense. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor.

Exclude: Travel-related expenses provided by federal, state, and local governments, or by a foreign government required to be separately reported under the Foreign Gifts and Decorations Act (5 U.S.C. § 7342); travel paid for by a Federal political committee; travel provided to a spouse or dependent child that is totally independent of his or her relationship to you.

	Source	Date(s)	Point of Departure—Destination—Point of Return	Lodging? (Y/N)	Food? (Y/N)	Was a Family Member Included? (Y/N)	Any time not at sponsor's expense
Examples:	Chicago Chamber of Commerce	Mar. 2	Wash., D.C.—Chicago—Wash., D.C.	N	N	N	N
	Roycroft Corporation	Aug. 6–13	Wash., D.C.—Los Angeles—Cleveland	Y	Y	Y	4 Days
	N B C	Sept 14	Indpls-DC-Indpls	N	N	N	N

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SCHEDULE VIII — POSITIONS

Report all positions, compensated or uncompensated, held during the current calendar year as an officer, director, trustee of an organization, partner, proprietor, representative, employee, or consultant of any corporation, firm, partnership, or other business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States.

Exclude: Positions held in any religious, social, fraternal, or political entities; positions solely of an honorary nature; and positions listed on Schedule I.

Position	Name of Organization
Consultant (uncompensated)	Burton Agency
Honorary Chairman	National Defense Council Foundation

SCHEDULE IX — AGREEMENTS

Identify the date, parties to, and general terms of any agreement or arrangement with respect to: future employment; a leave of absence during the period of government service; continuation or deferral of payments by a former or current employer other than the U.S. Government; or continuing participation in an employee welfare or benefit plan maintained by a former employer.

Date	Parties To	Terms of Agreement

GPO 1998 46-260 (mac)

Use additional sheets if more space is required.

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UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1997

Form A
For use by Members, officers, and employees

Stephen E. Buyer
(Full Name)

326 Cannon House Office Building
(Mailing Address)

Washington DC 20515

Daytime Telephone 202/225-5037

MC (Office Use Only) (6)

Filer Status
[X] Member of the U S House of Representatives — State IN, District 05
[ ] Officer or Employee — Employing Office

Report Type
[X] Annual (May 15)
[ ] Amendment
[ ] Termination — Termination Date

A $200 penalty shall be assessed against anyone who files more than 30 days late.

PRELIMINARY INFORMATION -- ANSWER EACH OF THESE QUESTIONS

I Did you or your spouse have "earned" income (e g , salaries or fees) of $200 or more from any source in the reporting period?
If yes, complete and attach Schedule I. Yes [ ] No [X]

II Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period?
If yes, complete and attach Schedule II. Yes [ ] No [X]

III Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period?
If yes, complete and attach Schedule III. Yes [X] No [ ]

IV Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset worth more than $1,000 in the reporting period?
If yes, complete and attach Schedule IV. Yes [X] No [ ]

V Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period?
If yes, complete and attach Schedule V. Yes [X] No [ ]

VI Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i e , aggregating more than $250 and not otherwise exempt)?
If yes, complete and attach Schedule VI. Yes [ ] No [X]

VII Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $250 from one source)?
If yes, complete and attach Schedule VII. Yes [ ] No [X]

VIII Did you hold any reportable positions on or before the date of filing in the current calendar year?
If yes, complete and attach Schedule VIII. Yes [ ] No [X]

IX Did you have any reportable agreement or arrangement with an outside entity?
If yes, complete and attach Schedule IX. Yes [X] No [ ]

Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION -- ANSWER EACH OF THESE QUESTIONS

TRUSTS- Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child? (See Instructions, pages 10-11) Yes [ ] No [X]

EXEMPTION Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption? (See Instructions, page 11) Yes [ ] No [X]

CERTIFICATION -- THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct or its designee Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil penalties and criminal sanctions (See 5 U S C app 4, 104 and 18 U S C 1001)

SIGNATURE OF REPORTING INDIVIDUAL — DATE (Month/Day/Year) May 14, 98

488

SCHEDULE III -- ASSETS AND "UNEARNED" INCOME

BLOCK A **Asset and/or Income Source** Identify (a) each asset held for investment or production of income with a fair market value exceeding $1,000 at the end of the reporting year, and (b) any other asset or source of income which generated more than $200 in "unearned" income during the year. For rental property or land, provide an address. Provide full names of any mutual funds. For an IRA or retirement plan that is *self-directed*, list the underlying assets worth more than $1,000. For an IRA or retirement plan that is *not* self-directed, name the institution holding the account. **Exclude:** Your personal residence(s) (unless there is rental income); any debt owed to you by your spouse, or by your or your spouse's child, parent, or sibling; any deposits totalling $5,000 or less in personal savings accounts; any financial interests in or income derived from U.S. Government retirement programs. If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC) or is jointly held (JT), in the optional column on the far left. For further information, see Instructions, pages 14-20			BLOCK B **Value of Asset** at close of reporting year If you use a valuation method other than fair market value, please specify the method used If an asset was sold and is included only because it generated income, the value should be "None."	BLOCK C **Type of Income** If other than one of the listed categories, specify the type of income by writing a brief description in this block	BLOCK D **Amount of Income** For IRA's and retirement plans that are *not* self-directed, you may write in "NA" for income	BLOCK E **Transaction** Indicate if asset was purchased(P), sold(S), or exchanged(E) in reporting year
SP DC *Examples* JT		SP	Mega Corp. Stock 123 Main St., Dover, Del 1st Bank of Paducah, KY accounts	$15,001 - $50,000 $250,001 - $500,000 $50,001 - $100,000	Dividends Rent Interest	$201 - $1,000 $1,001 - $2,500 $5,001 - $15,000	P
JT			Law Office, 103 W. Broadway, Monticello, Indiana	$50,001 - $100,000	Rent	$5,001 - $15,000	NA
JT			Money Market Account, Charles Schwab, Indianapolis, Indiana	$50,001 - $100,000	Interest	$5,001 - $15,000	NA
JT			Savings Account, Norwest Bank, Monticello, Indiana	$1,001 - $15,000	Interest	None - $200	NA
			IRA, Charles Schwab, Indianapolis, Indiana	$1,001 - $15,000	Interest	$201 - $1,000	NA
SP			IRA, Charles Schwab, Indianapolis, Indiana	$50,001 - $100,000	Interest	$1,001 - $2,500	NA
			Savings Account, Wright Patman Cong. FCU, Wash, DC	$1,001 - $15,000	Interest	$201 - $1,000	NA
			Checking Account, Wright Patman Cong. FCU, Wash, DC	$15,001 - $50,000	Interest	$201 - $1,000	NA

SCHEDULE III -- ASSETS AND "UNEARNED" INCOME

JT	Checking Account, Norwest Bank, Monticello, Indiana	$1,001 - $15,000	Interest	$201 - $1,000	NA
JT	C-Cube Microsystems, Common Stock	$15,001 - $50,000	Capital Loss	$201 - $1,000	S
JT					

SCHEDULE IV -- TRANSACTIONS

Report any purchase, sale, or exchange by you, your spouse, or dependent child during the reporting year of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child, or the purchase or sale of your personal residence, unless it is rented out. For further information, see instructions, pages 20-21.

SP,DC,JT	Asset	Type of Transaction	Date	Amount of Transaction
	Example Mega Corporation Common Stock	Purchase	10/12/94	$15,001 - $50,000
JT	C-Cube Microsystems Common Stock	Sold	10/02/97	$15,001 - $50,000
JT	Brightpoint Inc , Common Stock	Purchase	11/03/97	$15,001 - $50,000
JT	Brightpoint Inc , Common Stock	Purchase	11/24/97	$15,001 - $50,000
JT	Brightpoint Inc , Common Stock	Purchase	12/24/97	$1,001 - $15,000

SCHEDULE V -- LIABILITIES

Report liabilities of over $10,000 owed to any one creditor ***at any time*** during the reporting period by you, your spouse, or dependent child. Mark the highest amount owed during the year.
Exclude: Any mortgage on your personal residence (unless it is rented out), loans secured by automobiles, household furniture, or appliances, and liabilities owed to a spouse or the child, parent, or sibling of you or your spouse. Report ***revolving charge accounts*** only if the balance at the end of the reporting period exceeded $10,000. For further information see Instructions, pages 21-22.

SP,DC,J	Creditor	Type of Liability	Amount of Liability
	Example First Bank of Wilmington, Delaware	Mortgage on 123 Main St., Dover, Del.	$100,001 - $250,000
JT	Small Business Administration, Denver, CO	Mortgage on Law Office, 103 W. Broadway, Monticello, Indiana	$10,001 - $15,000

SCHEDULE IX -- AGREEMENTS

Identify the date, parties to, and general terms of any agreement or arrangement with respect to future employment, a leave of absence during the period of government service, continuation or deferral of payments by a former or current employer other than the U.S. Government, or continuing participation in an employee welfare or benefit plan maintained by a former employer. For further information, see Instructions, pages 26-27.

Date	Parties To	Terms of Agreement
12/31/92	Clients of former law practice	Fee agreements with former clients & referred law firms for payment when cases are resolved. All compensated work performed prior to January 1, 1993

STEVE BUYER
5TH DISTRICT, INDIANA
http://www.house.gov/buyer
WASHINGTON OFFICE
326 CANNON HOUSE OFFICE BUILDING
WASHINGTON, DC 20515-1405
(202) 225-5037

DISTRICT OFFICES
215 W. SYCAMORE STREET
KOKOMO, IN 46901
(765) 454-7551

100 SOUTH MAIN STREET
MONTICELLO, IN 47960
(219) 583-9819

CONGRESS OF THE UNITED STATES
HOUSE OF REPRESENTATIVES

COMMITTEE ON NATIONAL SECURITY
SUBCOMMITTEE CHAIRMAN
MILITARY PERSONNEL
SUBCOMMITTEE
MILITARY INSTALLATIONS AND FACILITIES

COMMITTEE ON VETERANS' AFFAIRS
SUBCOMMITTEE
OVERSIGHT AND INVESTIGATIONS

COMMITTEE ON THE JUDICIARY
SUBCOMMITTEE
CRIME

May 27, 1998

3)

MC ✓

Ms. Robin H. Carle
Clerk of the House
U.S. House of Representatives
H-154
The Capitol
Washington DC 20515

Dear Ms. Carle:

In reviewing my 1997 Financial Disclosure Statement, I noticed that i omitted Brightpoint Inc., Common Stock on Schedule III -- Assets and "Unearned" Income.

Enclosed is my corrected version of Schedule III for my 1997 Financial Disclosure Statement. Please amend my previous statement.

Thank you for your assistance in this matter. If you have any questions, please call Danelle Bowsher at x55037.

Best regards,

Steve Buyer

Steve Buyer
Member of Congress

SB:db

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SCHEDULE III -- ASSETS AND "UNEARNED" INCOME

BLOCK A **Asset and/or Income Source** Identify (a) each asset held for investment or production of income with a fair market value exceeding $1,000 at the end of the reporting year, and (b) any other asset or source of income which generated more than $200 in "unearned" income during the year. For rental property or land, provide an address. Provide full names of any mutual funds. For an IRA or retirement plan that is *self-directed*, list the underlying assets worth more than $1,000. For an IRA or retirement plan that is *not* self-directed, name the institution holding the account. **Exclude:** Your personal residence(s) (unless there is rental income), any debt owed to you by your spouse, or by your or your spouse's child, parent, or sibling; any deposits totalling $5,000 or less in personal savings accounts; any financial interests in or income derived from U.S. Government retirement programs. If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC) or is jointly held (JT), in the optional column on the far left. For further information, see Instructions, pages 14-20	BLOCK B **Value of Asset** at close of reporting year If you use a valuation method other than fair market value, please specify the method used If an asset was sold and is included only because it generated income, the value should be "None."	BLOCK C **Type of Income** If other than one of the listed categories, specify the type of income by writing a brief description in this block.	BLOCK D **Amount of Income** For IRA's and retirement plans that are *not* self-directed, you may write in "NA" for income	BLOCK E **Transaction** Indicate if asset was purchased(P), sold(S), or exchanged(E) in reporting year
SP DC JT	*Examples* SP Mega Corp Stock 123 Main St., Dover, Del 1st Bank of Paducah, KY accounts	$15,001 - $50,000 $250,001 - $500,000 $50,001 - $100,000	Dividends Rent Interest	$201 - $1,000 $1,001 - $2,500 $5,001 - $15,000	P
JT	Law Office, 103 W. Broadway, Monticello, Indiana	$50,001 - $100,000	Rent	$5,001 - $15,000	NA
JT	Money Market Account, Charles Schwab, Indianapolis, Indiana	$50,001 - $100,000	Interest	$5,001 - $15,000	NA
JT	Savings Account, Norwest Bank, Monticello, Indiana	$1,001 - $15,000	Interest	None - $200	NA
	IRA, Charles Schwab, Indianapolis, Indiana	$1,001 - $15,000	Interest	$201 - $1,000	NA
SP	IRA, Charles Schwab, Indianapolis, Indiana	$50,001 - $100,000	Interest	$1,001 - $2,500	NA
	Savings Account, Wright Patman Cong. FCU, Wash, DC	$1,001 - $15,000	Interest	$201 - $1,000	NA
	Checking Account, Wright Patman Cong. FCU, Wash, DC	$15,001 - $50,000	Interest	$201 - $1,000	NA

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SCHEDULE III -- ASSETS AND "UNEARNED" INCOME

JT	Checking Account, Norwest Bank, Monticello, Indiana	$1,001 - $15,000	Interest	$201 - $1,000	NA
JT	C-Cube Microsystems, Common Stock	$15,001 - $50,000	Capital Loss	$201 - $1,000	S
JT	Brightpoint Inc , Common Stock	$15,001 - $50,000	N/A	None - $200	P
JT	Brightpoint Inc , Common Stock	$15,001 - $50,000	N/A	None - $200	P
JT	Brightpoint Inc , Common Stock	$1,001 - $15,000	N/A	None - $200	P

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1997

Form A
For use by Members, officers, and employees

RECEIVED LEGISLATIVE RESOURCE CENTER MAY 13 1998

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RECEIVED OFFICE OF THE CLERK U.S. HOUSE OF REPRESENTATIVES 98 MAY 14 PM 12:21

(7)

HERBERT LEON CALLAHAN
(Full Name)

3251 RIVERE DU CHIEN DRIVE
(Mailing Address)

MOBILE AL 36693

Daytime Telephone: (334) 690-2811

MI COMMITTEE ON STANDARDS
(Office Use Only)

Filer Status

[X] Member of the U.S. House of Representatives — State: AL, District: 01

[ ] Officer or Employee — Employing Office:

Report Type

[X] Annual (May 15)

[ ] Amendment

[ ] Termination — Termination Date:

A $200 penalty shall be assessed against anyone who files more than 30 days late.

PRELIMINARY INFORMATION -- ANSWER EACH OF THESE QUESTIONS

I Did you or your spouse have "earned" income (e.g., salaries or fees) of $200 or more from any source in the reporting period? **If yes, complete and attach Schedule I.** Yes [X] No [ ]

II Did any individual or organization make a donation to charity in lieu of paying you for a speech, apppearance, or article in the reporting period? **If yes, complete and attach Schedule II.** Yes [ ] No [X]

III Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? **If yes, complete and attach Schedule III.** Yes [X] No [ ]

IV Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset worth more than $1,000 in the reporting period? **If yes, complete and attach Schedule IV.** Yes [ ] No [X]

V Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? **If yes, complete and attach Schedule V.** Yes [X] No [ ]

VI Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $250 and not otherwise exempt)? **If yes, complete and attach Schedule VI.** Yes [ ] No [X]

VII Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $250 from one source)? **If yes, complete and attach Schedule VII.** Yes [ ] No [X]

VIII Did you hold any reportable positions on or before the date of filing in the current calendar year? **If yes, complete and attach Schedule VIII.** Yes [X] No [ ]

IX Did you have any reportable agreement or arrangement with an outside entity? **If yes, complete and attach Schedule IX.** Yes [X] No [ ]

Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION -- ANSWER EACH OF THESE QUESTIONS

TRUSTS- Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child? (See Instructions, pages 10-11.) Yes [ ] No [X]

EXEMPTION Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption? (See Instructions, page 11.) Yes [ ] No [X]

CERTIFICATION -- THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended. The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct or its designee. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil and criminal sanctions (See 5 U.S.C. app. 6, 104)

SIGNATURE OF REPORTING INDIVIDUAL: H E Callahan

DATE (Month/Day/Year): 5/11/98

497

SCHEDULE I -- EARNED INCOME

List the source, type, and amount of earned income from any source (other than the filer's current employment by the U.S. Government) totalling $200 or more during the preceding calendar year For a spouse, list the source and amount of any honoraria; list only the source for other spouse earned income exceeding $1,000. For further information, see Instructions, pages 12-13.

	Source	Type	Amount
Examples	Keene State	Approved Teaching Fee	$10,000
	State of Maryland	Legislative Pension	$9,000
	Civil War Roundtable (Oct 2nd)	Spouse Speech	$1,000
	Ontario County Board of Education	Spouse Salary	NA
	US HOUSE OF REPRESENTATIVES	SALARY	133,600

For payments to charity in lieu of honoraria, use Schedule II.

SCHEDULE III -- ASSETS AND "UNEARNED" INCOME

BLOCK A **Asset and/or Income Source** Identify (a) each asset held for investment or production of income with a fair market value exceeding $1,000 at the end of the reporting year, and (b) any other asset or source of income which generated more than $200 in "unearned" income during the year. For rental property or land, provide an address. Provide full names of any mutual funds. For an IRA or retirement plan that is *self-directed*, list the underlying assets worth more than $1,000. For an IRA or retirement plan that is *not* self-directed, name the institution holding the account. **Exclude**: Your personal residence(s) (unless there is rental income), any debt owed to you by your spouse, or by your or your spouse's child, parent, or sibling, any deposits totalling $5,000 or less in personal savings accounts, any financial interests in or income derived from U.S. Government retirement programs. If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC) or is jointly held (JT), in the optional column on the far left. For further information, see Instructions, pages 14-20			BLOCK B **Value of Asset** at close of reporting year If you use a valuation method other than fair market value, please specify the method used. If an asset was sold and is included only because it generated income, the value should be "None."	BLOCK C **Type of Income** If other than one of the listed categories, specify the type of income by writing a brief description in this block.	BLOCK D **Amount of Income** For IRA's and retirement plans that are *not* self-directed, you may write in "NA" for income.	BLOCK E **Transaction** Indicate if asset was purchased(P), sold(S), or exchanged(E) in reporting year
SP, DC, *Examples* JT	SP	Mega Corp. Stock 123 Main St., Dover, Del. 1st Bank of Paducah, KY accounts	$15,001 - $50,000 $250,001 - $500,000 $50,001 - $100,000	Dividends Rent Interest	$201 - $1,000 $1,001 - $2,500 $5,001 - $15,000	P
		AM SOUTH BANK	$100,001 - $250,000	Interest	$1,001 - $2,500	NA
		REGIONS BANK	$1,001 - $15,000	Interest	$2,501 - $5,000	NA
		FEDERAL CREDIT UNION	$15,001 - $50,000	Interest	$1 - $200	NA
		THE FINCH COMPANIES	$100,001 - $250,000	Interest	$15,001 - $50,000	NA
		CORTE BUSINESS SERVICES-COMMON STOCK	$1,001 - $15,000	Dividends	$1 - $200	NA
		CHECKERS DRIVE IN RESTAURANTS INC-COMMON STOCK	$1,001 - $15,000	Dividends	$1 - $200	NA
		FROM "SUB S" CORPORATION (PASS THROUGH ITEMS)				
		FURNITURE LEASING CORPORATION	Over $1,000,000	Dividends	$100,001 - $1,000,000	NA

SCHEDULE III -- ASSETS AND "UNEARNED" INCOME

FROM PARTNERSHIPS (PASS THROUGH ITEMS)				
H.B. DEVELOPMENT VENTURE	$15,001 - $50,000	Interest	$1 - $200	NA
DOUBLE M JOINT VENTURE	$15,001 - $50,000	Rent	$1 - $200	NA
CHOCTAW COUNTY ALABAMA CAMP	$1,001 - $15,000	None	$1 - $200	NA

SCHEDULE V -- LIABILITIES

Report liabilities of over $10,000 owed to any one creditor ***at any time*** during the reporting period by you, your spouse, or dependent child. Mark the highest amount owed during the year.
Exclude: Any mortgage on your personal residence (unless it is rented out), loans secured by automobiles, household furniture, or appliances, and liabilities owed to a spouse, or the child, parent, or sibling of you or your spouse. Report ***revolving charge accounts*** only if the balance at the end of the reporting period exceeded $10,000. For further information, see Instructions, pages 21-22.

SP,DC,J	Creditor	Type of Liability	Amount of Liability
	Example First Bank of Wilmington, Delaware	Mortgage on 123 Main St., Dover, Del	$100,001 - $250,000
	SOUTHTRUST BANK	PERSONAL	$10,001 - $15,000
	VICTOR T. HUDSON	PERSONAL	$10,001 - $15,000

SCHEDULE VIII -- POSITIONS

Report all positions, compensated or uncompensated, held during the current calendar year as an officer, director, trustee of an organization, partner, proprietor, representative, employee, or consultant of any corporation, firm, partnership, or other business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States. For further information, see Instructions, pages 25-26

Exclude: Positions held in any religious, social, fraternal, or political entities, positions solely of an honorary nature, and positions listed on Schedule I

Position	Organization
PARTNER	DOUBLE-M JOINT VENTURE
PARTNER	H B DEVELOPMENT
CHAIRMAN	FURNITURE LEASING CORP

SCHEDULE IX -- AGREEMENTS

Identify the date, parties to, and general terms of any agreement or arrangement with respect to: future employment; a leave of absence during the period of government service, continuation or deferral of payments by a former or current employer other than the U.S. Government; or continuing participation in an employee welfare or benefit plan maintained by a former employer. For further information, see Instructions, page 26

Date	Parties To	Terms of Agreement
10/31/94	SECURE-IT SELF STORAGE	WHEN SECURE-IT SELF STORAGE WAS SOLD IN 1994 AGREEMENT TO SHARE NET PROFITS IF SOLD IN FIVE YEARS.

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1997

Form A
For use by Members, officers, and employees

98 MAY 14 AM 11:32

MAY 13 1998

(Office Use Only)

HERBERT LEON CALLAHAN
(Full Name)

3251 RIVERE DU CHIEN DRIVE
(Mailing Address)

MOBILE AL 36693
Daytime Telephone (334) 690-2811

Filer Status

[X] Member of the U S House of Representatives — State AL District 01

[ ] Officer or Employee — Employing Office

Report Type

[X] Annual (May 15)

[ ] Amendment

[ ] Termination — Termination Date

A $200 penalty shall be assessed against anyone who files more than 30 days late.

PRELIMINARY INFORMATION -- ANSWER EACH OF THESE QUESTIONS

I Did you or your spouse have "earned" income (e g , salaries or fees) of $200 or more from any source in the reporting period?
If yes, complete and attach Schedule I. Yes [X] No [ ]

II Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period?
If yes, complete and attach Schedule II. Yes [ ] No [X]

III Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period?
If yes, complete and attach Schedule III. Yes [X] No [ ]

IV Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset worth more than $1,000 in the reporting period?
If yes, complete and attach Schedule IV. Yes [ ] No [X]

V Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period?
If yes, complete and attach Schedule V. Yes [X] No [ ]

VI Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i e , aggregating more than $250 and not otherwise exempt)?
If yes, complete and attach Schedule VI. Yes [ ] No [X]

VII Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $250 from one source)?
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If yes, complete and attach Schedule VIII. Yes [X] No [ ]

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Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.

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TRUSTS Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child? (See Instructions, pages 10-11) Yes [ ] No [X]

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SIGNATURE OF REPORTING INDIVIDUAL — DATE (Month/Day/Year)

H L Callahan — 5/11/98

504

SCHEDULE I -- EARNED INCOME

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	Source	Type	Amount
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SCHEDULE III -- ASSETS AND "UNEARNED" INCOME

	BLOCK A **Asset and/or Income Source** Identify (a) each asset held for investment or production of income with a fair market value exceeding $1,000 at the end of the reporting year, and (b) any other asset or source of income which generated more than $200 in "unearned" income during the year. For rental property or land, provide an address. Provide full names of any mutual funds. For an IRA or retirement plan that is *self-directed*, list the underlying assets worth more than $1,000. For an IRA or retirement plan that is *not* self-directed, name the institution holding the account. **Exclude:** Your personal residence(s) (unless there is rental income); any debt owed to you by your spouse, or by your or your spouse's child, parent, or sibling; any deposits totalling $5,000 or less in personal savings accounts, any financial interests in or income derived from U.S. Government retirement programs. If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC) or is jointly held (JT), in the optional column on the far left. For further information, see Instructions, pages 14-20	BLOCK B **Value of Asset** at close of reporting year If you use a valuation method other than fair market value, please specify the method used If an asset was sold and is included only because it generated income, the value should be "None."	BLOCK C **Type of Income** If other than one of the listed categories, specify the type of income by writing a brief description in this block	BLOCK D **Amount of Income** For IRA's and retirement plans that are *not* self-directed, you may write in "NA" for income	BLOCK E **Transaction** Indicate if asset was purchased(P), sold(S), or exchanged(E) in reporting year
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Report all positions, compensated or uncompensated, held during the current calendar year as an officer, director, trustee of an organization, partner, proprietor, representative, employee, or consultant of any corporation, firm, partnership, or other business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States. For further information, see instructions, pages 25-26

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Position	Organization
PARTNER	DOUBLE-M JOINT VENTURE
PARTNER	H.B. DEVELOPMENT
CHAIRMAN	FURNITURE LEASING CORP

SCHEDULE IX -- AGREEMENTS

Identify the date, parties to, and general terms of any agreement or arrangement with respect to: future employment; a leave of absence during the period of government service; continuation or deferral of payments by a former or current employer other than the U.S. Government; or continuing participation in an employee welfare or benefit plan maintained by a former employer. For further information, see Instructions, page 26

Date	Parties To	Terms of Agreement
10/31/94	SECURE-IT SELF STORAGE	WHEN SECURE-IT SELF STORAGE WAS SOLD IN 1994 AGREEMENT TO SHARE NET PROFITS IF SOLD IN FIVE YEARS

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1997

FORM A
For use by Members, officers, and employees

93 MAY 15 PM 3:26

MC (9)

HAND DELIVERED
(Office Use Only)

KENNETH STANTON CALVERT
(Full Name)

1034 LONGWORTH BUILDING
(Mailing Address)

WASHINGTON, D.C. 20515

Daytime Telephone: 202/225-1986

Filer Status
[X] Member of the U.S. House of Representatives — State CA, District 43rd
[ ] Officer or Employee — Employing Office

Report Type
[X] Annual (May 15)
[ ] Amendment
[ ] Termination — Termination Date

A *$200 penalty* shall be assessed against anyone who files more than 30 days late.

PRELIMINARY INFORMATION — ANSWER EACH OF THESE QUESTIONS

I. Did you or your spouse have "earned" income (e.g., salaries or fees) of $200 or more from any source in the reporting period? **If yes, complete and attach Schedule I.** — Yes [ ] No [X]

II. Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? **If yes, complete and attach Schedule II.** — Yes [ ] No [X]

III. Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? **If yes, complete and attach Schedule III.** — Yes [X] No [ ]

IV. Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset worth more than $1,000 in the reporting period? **If yes, complete and attach Schedule IV.** — Yes [X] No [ ]

V. Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? **If yes, complete and attach Schedule V.** — Yes [X] No [ ]

VI. Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $250 and not otherwise exempt)? **If yes, complete and attach Schedule VI.** — Yes [ ] No [X]

VII. Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $250 from one source)? **If yes, complete and attach Schedule VII.** — Yes [X] No [ ]

VIII. Did you hold any reportable positions on or before the date of filing in the current calendar year? **If yes, complete and attach Schedule VIII.** — Yes [ ] No [X]

IX. Did you have any reportable agreement or arrangement with an outside entity? **If yes, complete and attach Schedule IX.** — Yes [ ] No [X]

Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION — ANSWER EACH OF THESE QUESTIONS

TRUSTS—Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child? — Yes [ ] No [X]

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SIGNATURE OF REPORTING INDIVIDUAL: Kenneth S. Calvert

DATE (Month/Day/Year): MAY 14, 1998

511

SCHEDULE I — EARNED INCOME

List the source, type, and amount of earned income from any source (other than the filer's current employment by the U S Government) totalling $200 or more during the preceding calendar year. For a spouse, list the source and amount of any honoraria, list only the source for other spouse earned income exceeding $1,000.

	Source	Type	Amount
Examples	Keene State	Approved Teaching Fee	$6,000
	State of Maryland	Legislative Pension	$9,000
	Civil War Roundtable (Oct 2nd)	Spouse Speech	$1,000
	Ontario County Board of Education	Spouse Salary	NA
	N/A		

For payments to charity in lieu of honoraria, use Schedule II.

SCHEDULE II — PAYMENTS IN LIEU OF HONORARIA MADE TO CHARITY

List the source, activity (i.e , speech, appearance, or article), date, and amount of any payment made by the sponsor of an event to a charitable organization in lieu of an honorarium. A separate confidential list of charities receiving such payments must be filed directly with the Committee on Standards of Official Conduct. An envelope for transmitting the list is included in each Member's filing package.

Source	Activity	Date	Amount
Examples Association of American Associations, Wash , D C XYZ Magazine	Speech Article	Feb 2, 1997 Aug 13, 1997	$2,000 $500
N/A			

This page may be copied if more space is required.

Name KENNETH STANTON CALVERT | Page 4 of 9

SCHEDULE III — ASSETS AND "UNEARNED" INCOME

BLOCK A — Asset and/or Income Source

Identify (a) each asset held for investment or production of income with a fair market value exceeding $1,000 at the end of the reporting year, and (b) any other asset or source of income which generated more than $200 in "unearned" income during the year. For rental property or land, provide an address. Provide full names of any mutual funds. For an IRA or retirement plan that is *self-directed*, list the underlying assets worth more than $1,000. For an IRA or retirement plan that is not self-directed, name the institution holding the account.

Exclude: Your personal residence(s) (unless there is rental income), any debt owed to you by your spouse, or by your or your spouse's child, parent, or sibling, any deposits totalling $5,000 or less in personal savings accounts; any financial interests in or income derived from U.S. Government retirement programs.

If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC) or is jointly held (JT), in the optional column on the far left.

BLOCK B — Value of Asset

at close of reporting year. If you use a valuation method other than fair market value, please specify the method used. If an asset was sold and is included only because it generated income, the value should be "None."

BLOCK C — Type of Income

BLOCK D — Amount of Income

For IRA's and retirement plans that are *not* self-directed, you may write in "NA" for income.

BLOCK E — Transaction

Indicate if asset was purchased (P), sold (S), or exchanged (E) in reporting year.

	BLOCK A	BLOCK B												BLOCK C							BLOCK D										BLOCK E
		A None	B $1 – $1,000	C $1,001 – $15,000	$15,001 – $50,000	E $50,001 – $100,000	F $100,001 – $250,000	G $250,001 – $500,000	H $500,001 – $1,000,000	I $1,000,001 – $5,000,000	J $5,000,001 – $25,000,000	K $25,000,001 – $50,000,000	L Over $50,000,000	DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Type of Income (Specify. For Example, Partnership Income or Farm Income)	I None	II $1 – $200	III $201 – $1,000	IV $1,001 – $2,500	V $2,501 – $5,000	VI $5,001 – $15,000	VII $15,001 – $50,000	VIII $50,001 – $100,000	IX $100,001 – $1,000,000	X $1,000,001 – $5,000,000	XI Over $5,000,000	P, S, E
SP.														X																	
DC.	*Examples*		Indefinite			X														Royalties											P
JT							X									X									X				X		
	Commercial Rental 63 W Grand, Corona, CA							X							X						X										
	Vacant Land Greenway Farms TX							X							X						X										
	Vacant Land, Green River Business Pk, Corona, CA						X										X				X										
	Note Receivable Calvert Real Prop, Inc						X									X													X		
	Ltd. Partnership Western Ag, TCD's	X															X				X										
	Stock in Calvert Real Prop, FNC, Corona, CA						X							X							X										

For additional assets and unearned income, use next page.

SCHEDULE III — ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Name KENNETH STANTON CALVERT | Page 5 of 9

SP. DC. JT	BLOCK A Asset and/or Income Source	BLOCK B Year-End Value of Asset											BLOCK C Type of Income							BLOCK D Amount of Income											BLOCK E Transaction
		A None	B $1 – $1,000	C $1,001 – $15,000	D $15,001 – $50,000	E $50,001 – $100,000	F $100,001 – $250,000	G $250,001 – $500,000	H $500,001 – $1,000,000	I $1,000,001 – $5,000,000	J $5,000,001 – $25,000,000	K $25,000,001 – $50,000,000	L Over $50,000,000	DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Type of Income (Specify)	I None	II $1 – $200	III $201 – $1,000	IV $1,001 – $2,500	V $2,501 – $5,000	VI $5,001 – $15,000	VII $15,001 – $50,000	VIII $50,001 – $100,000	IX $100,001 – $1,000,000	X $1,000,001 – $5,000,000	XI Over $5,000,000	P, S, E
	Land - Temescal Creek Corona, CA						X								X								X							
	Comm' Rental (27%) Main/Washburn,CoronaCA						X								X										X					
	Temescal Int. Prop Vac Land 9.16%,Corona CA						X										X				X										S
	Vac Land Santa Rosa Ranch, Murrieta,CA						X										X				X										S
	Vac Land, Corona,CA Grand Ave/Blaine LLC (12½%)						X								X										X						P
	Note Receivable Temescal Int. Prop						X										X						X								

This page may be copied if more space is required.

SCHEDULE V — LIABILITIES

Report liabilities of over $10,000 owed to any one creditor ***at any time*** during the reporting period by you, your spouse, or dependent child. Mark the highest amount owed during the year. **Exclude:** Any mortgage on your personal residence (unless it is rented out), loans secured by automobiles, household furniture, or appliances, and liabilities owed to a spouse, or the child, parent, or sibling of you or your spouse. Report ***revolving charge accounts*** only if the balance at the end of the reporting period exceeded $10,000.

SP, DC, JT	Creditor	Type of Liability	Amount of Liability									
			B $10,001–$15,000	C $15,001–$50,000	D $50,001–$100,000	E $100,001–$250,000	F $250,001–$500,000	G $500,001–$1,000,000	H $1,000,001–$5,000,000	I $5,000,001–$25,000,000	J $25,000,001–$50,000,000	K Over $50,000,000
Example	First Bank of Wilmington, Delaware	Mortgage on 123 Main St., Dover, De!				X						
	* Upland Bank, Upland, CA (#1) Upland Bank, Upland, CA (#2)	Mortgage on 63 W Grand Blvd., Corona, CA				X X						
	* SWF 1996 Ltd Partnership Dallas, TX	Mortgage on 63 W Grand Blvd., Corona, CA			X							
	SWF 1996 Ltd Partnership Dallas, TX	Mortgage on Santa Rosa Murrieta, CA					X					
	SWF 1996 Ltd Partnership Dallas, TX	Mortgage on Green River Bus Park, Corona, CA				X						
	Princeland Prop Int'l, Inc Laguna Liguel, CA	Mortgage on Grand Ave/ Blaine LLC (12½)		X								

* Upland Bank Loan #1 and SWF 1996 Ltd Partnership paid off with Upland Bank Loan #2

SCHEDULE VI — GIFTS

Report the source, a brief description, and the value of all gifts totalling more than $250 received by you, your spouse, or a dependent child from any source during the year.

Exclude: Gifts from relatives, gifts of personal hospitality of an individual, local meals, and gifts to a spouse or dependent child that are totally independent of his or her relationship to you. Gifts with a value of $100 or less need not be added towards the $250 disclosure threshold.

Note: The gift rule (House Rule 51) prohibits gifts except as specifically provided in the rule.

Source	Description	Value
Example Mr. Joseph H. Smith, Anytown, Anystate	Silver Platter (determination on personal friendship received from Committee on Standards)	$270

Use additional sheets if more space is required.

SCHEDULE IV — TRANSACTIONS

Name KENNETH STANTON CALVERT | Page 7 of 9

Report any purchase, sale, or exchange by you, your spouse, or dependent child during the reporting year of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child, or the purchase or sale of your personal residence, unless it is rented out.

SP, DC, JT	Asset	Type of Transaction: PURCHASE	SALE	EXCHANGE	Date (MO/DAY/YR)	Amount of Transaction: B $1,001–$15,000	C $15,001–$50,000	D $50,001–$100,000	E $100,001–$250,000	F $250,001–$500,000	G $500,001–$1,000,000	H $1,000,001–$5,000,000	I $5,000,001–$25,000,000	J $25,000,001–$50,000,000	K Over $50,000,000
SP	*Example* Mega Corporation Common Stock	X			10–12–97		X								
	Temescal Int. Prop Vacant Land 9.16%, Corona, CA		X		6-10-97				X						
	Vacant Land, Santa Rosa Ranch Murrieta, CA		X		9-26-97					X					
	Vacant Land, Grand Ave/Blaine LLC Corona, CA 12½%	X			1-10-97			X							

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SCHEDULE VII —TRAVEL PAYMENTS AND REIMBURSEMENTS

Identify the source and list travel itinerary, dates, and nature of expenses provided for travel and travel-related expenses totalling more than $250 received by you, your spouse, or a dependent child during the reporting period. Indicate whether a family member accompanied the traveler at the sponsor's expense, and the amount of time, if any, that was not at the sponsor's expense. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor.

Exclude: Travel-related expenses provided by federal, state, and local governments, or by a foreign government required to be separately reported under the Foreign Gifts and Decorations Act (5 U.S.C. § 7342); travel paid for by a Federal political committee; travel provided to a spouse or dependent child that is totally independent of his or her relationship to you.

Source	Date(s)	Point of Departure—Destination—Point of Return	Lodging? (Y/N)	Food? (Y/N)	Was a Family Member Included? (Y/N)	Any time not at sponsor's expense
Examples: Chicago Chamber of Commerce	Mar 2	Wash., D C —Chicago—Wash., D C	N	N	N	N
Roycroft Corporation	Aug 6–13	Wash , D C —Los Angeles—Cleveland	Y	Y	Y	4 Days
Tobacco Institute	Feb 13-16	Wash.,Phoenix,Ontario	Y	Y	N	N
Aspen Institute	Mar 7-9	Wash.,Hershey,PA,Ontario	Y	Y	N	N

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SCHEDULE VIII — POSITIONS

Report all positions, compensated or uncompensated, held during the current calendar year as an officer, director, trustee of an organization, partner, proprietor, representative, employee, or consultant of any corporation, firm, partnership, or other business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States.

Exclude: Positions held in any religious, social, fraternal, or political entities; positions solely of an honorary nature, and positions listed on Schedule I.

Position	Name of Organization
	N/A

SCHEDULE IX — AGREEMENTS

Identify the date, parties to, and general terms of any agreement or arrangement with respect to: future employment; a leave of absence during the period of government service; continuation or deferral of payments by a former or current employer other than the U.S. Government; or continuing participation in an employee welfare or benefit plan maintained by a former employer.

Date	Parties To	Terms of Agreement
	N/A	

GPO 1998 46-260 (mac)

Use additional sheets if more space is required.

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98 MAY 21 PM 3:13

UNITED STATES HOUSE OF REPRESENTATIVES
FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1997

FORM A
For use by Members, officers, and employees

David Lee Camp
(Full Name)

5901 Woodview Pass
(Mailing Address)

Midland, MI 48642

Daytime Telephone
(202)225-3561

HAND DELIVERED
(Office Use Only)

Filer Status	[X] Member of the U.S. House of Representatives	State MI District 4	[ ] Officer or Employee	Employing Office	**A *$200 penalty* shall be assessed against anyone who files more than 30 days late.**
Report Type	[X] Annual (May 15)	[ ] Amendment	[ ] Termination	Termination Date:	

PRELIMINARY INFORMATION — ANSWER EACH OF THESE QUESTIONS

I. Did you or your spouse have "earned" income (e.g., salaries or fees) of $200 or more from any source in the reporting period? **If yes, complete and attach Schedule I.**	Yes [X]	No [ ]	VI. Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $250 and not otherwise exempt)? **If yes, complete and attach Schedule VI.**	Yes [ ]	No [X]
II. Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? **If yes, complete and attach Schedule II.**	Yes [ ]	No [X]	VII. Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $250 from one source)? **If yes, complete and attach Schedule VII.**	Yes [ ]	No [X]
III. Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? **If yes, complete and attach Schedule III.**	Yes [X]	No [ ]	VIII. Did you hold any reportable positions on or before the date of filing in the current calendar year? **If yes, complete and attach Schedule VIII.**	Yes [ ]	No [X]
IV. Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset worth more than $1,000 in the reporting period? **If yes, complete and attach Schedule IV.**	Yes [X]	No [ ]	IX. Did you have any reportable agreement or arrangement with an outside entity? **If yes, complete and attach Schedule IX.**	Yes [ ]	No [X]
V. Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? **If yes, complete and attach Schedule V.**	Yes [ ]	No [X]	**Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.**		

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION — ANSWER EACH OF THESE QUESTIONS

TRUSTS—Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child?	Yes [ ]	No [X]
EXEMPTION—Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption?	Yes [ ]	No [X]

CERTIFICATION — THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended. The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct or its designee. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil penalities and criminal sanctions (*See* 5 U.S.C. app. 4, §104 and 18 U.S.C. §1001).

SIGNATURE OF REPORTING INDIVIDUAL: David Lee Camp

DATE (Month/Day/Year): May 21, 1998

520

Name	David Lee Camp	Page 1 of 1

SCHEDULE I — EARNED INCOME

List the source, type, and amount of earned income from any source (other than the filer's current employment by the U.S. Government) totalling $200 or more during the preceding calendar year. For a spouse, list the source and amount of any honoraria; list only the source for other spouse earned income exceeding $1,000.

Source	Type	Amount
Examples: Keene State	Approved Teaching Fee	$6,000
State of Maryland	Legislative Pension	$9,000
Civil War Roundtable (Oct. 2nd)	Spouse Speech	$1,000
Ontario County Board of Education	Spouse Salary	NA
Nancy L. Camp - The Dow Chemical Company	Spouse Salary	NA

For payments to charity in lieu of honoraria, use Schedule II.

Name David Lee Camp | Page 1 of 3

SCHEDULE III — ASSETS AND "UNEARNED" INCOME

BLOCK A — Asset and/or Income Source

Identify (a) each asset held for investment or production of income with a fair market value exceeding $1,000 at the end of the reporting year, and (b) any other asset or source of income which generated more than $200 in "unearned" income during the year. For rental property or land, provide an address. Provide full names of any mutual funds. For an IRA or retirement plan that is *self-directed*, list the underlying assets worth more than $1,000. For an IRA or retirement plan that is not self-directed, name the institution holding the account.

Exclude: Your personal residence(s) (unless there is rental income); any debt owed to you by your spouse, or by your or your spouse's child, parent, or sibling; any deposits totalling $5,000 or less in personal savings accounts; any financial interests in or income derived from U.S. Government retirement programs.

If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC) or is jointly held (JT), in the optional column on the far left.

SP	*Examples*	SP	Mega Corp. Stock
DC			Simon & Schuster
JT			1st Bank of Paducah, KY accounts

BLOCK B — Value of Asset

at close of reporting year.
If you use a valuation method other than fair market value, please specify the method used. If an asset was sold and is included only because it generated income, the value should be "None."

	A None	B $1 – $1,000	C $1,001 – $15,000	E $15,001 – $50,000	F $50,001 – $100,000	G $100,001 – $250,000	H $250,001 – $500,000	I $500,001 – $1,000,000	J $1,000,001 – $5,000,000	K $5,000,001 – $25,000,000	L $25,000,001 – $50,000,000	Over $50,000,000
Examples		Indefinite			X							
						X						
Camp Real Estate Agency – Commercial Blds. in Michigan				X								
Camp Agency – Note Receivable			X									
Chemical Bank & Trust–Checking		X										
Chemical Bank & Trust–Checking		X										
Chemical Bank & Trust–Checking		X										
Chemical Financial Corp.–Stock					X							

BLOCK C — Type of Income

	DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Type of Income (Specify. For Example, Partnership Income or Farm Income)
Examples	X						
			X				Royalties
Camp Real Estate Agency – Commercial Blds. in Michigan		X					
Camp Agency – Note Receivable			X				
Chemical Bank & Trust–Checking			X				
Chemical Bank & Trust–Checking			X				
Chemical Bank & Trust–Checking			X				
Chemical Financial Corp.–Stock	X						

BLOCK D — Amount of Income

For IRA's and retirement plans that are *not* self-directed, you may write in "NA" for income

	I None	II $1 – $200	III $201 – $1,000	IV $1,001 – $2,500	V $2,501 – $5,000	VI $5,001 – $15,000	VII $15,001 – $50,000	VIII $50,001 – $100,000	IX $100,001 – $1,000,000	X $1,000,001 – $5,000,000	XI Over $5,000,000
Examples				X							
						X			X		
Camp Real Estate Agency – Commercial Blds. in Michigan	X										
Camp Agency – Note Receivable			X								
Chemical Bank & Trust–Checking		X									
Chemical Bank & Trust–Checking		X									
Chemical Bank & Trust–Checking		X									
Chemical Financial Corp.–Stock				X							

BLOCK E — Transaction

Indicate if asset was purchased (P), sold (S), or exchanged (E) in reporting year.

	P, S, E
Examples	P
Camp Real Estate Agency – Commercial Blds. in Michigan	
Camp Agency – Note Receivable	
Chemical Bank & Trust–Checking	
Chemical Bank & Trust–Checking	
Chemical Bank & Trust–Checking	
Chemical Financial Corp.–Stock	

For additional assets and unearned income, use next page.

SCHEDULE III — ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Name: David Lee Camp

SP, DC, JT	BLOCK A: Asset and/or Income Source	BLOCK B: Year-End Value of Asset												BLOCK C: Type of Income							BLOCK D: Amount of Income										BLOCK E: Transaction
		A None	B $1 – $1,000	C $1,001 – $15,000	D $15,001 – $50,000	E $50,001 – $100,000	F $100,001 – $250,000	G $250,001 – $500,000	H $500,001 – $1,000,000	I $1,000,001 – $5,000,000	J $5,000,001 – $25,000,000	K $25,000,001 – $50,000,000	L Over $50,000,000	DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Type of Income (Specify)	I None	II $1 – $200	III $201 – $1,000	IV $1,001 – $2,500	V $2,501 – $5,000	VI $5,001 – $15,000	VII $15,001 – $50,000	VIII $50,001 – $100,000	IX $100,001 – $1,000,000	X $1,000,001 – $5,000,000	XI Over $5,000,000	P, S, E
	American Home Products-Stock					X								X										X							
	Comerica, Inc. – Stock						X							X											X						
	Dow Chemical Company-Stock								X					X													X				
	H J Heinz – Stock					X								X										X							
	Kellogg – Stock					X								X										X							
	VanKampen Municipal Trust			X												X						X									
	A G Edwards MMF – Centennial			X												X							X								
	A G Edwards MMF-Cent.-Tax Exempt	X														X							X								
	A G Edwards – Rollovers – IRA Self Directed																														
	Daily Cash Accum. Fund			X										X								X									
	Barnett Banks			X										X								X									P
	H J Heinz			X										X									X								
	Bond Fund of America				X									X										X							
	Seligman CMMNCTNS			X										X									X								S
	Seligman Growth Fund			X										X									X								P
	A G Edwards – IRA Self Directed																														
	Daily Cash Accum.		X											X								X									
	Chemical Financial Corporation				X									X									X								
	Seligman Growth Fund				X									X										X							P
	Seligman Henderson Global Fund			X										X										X							S
	Gillette Company – Stock					X								X									X								
	Home Depot, Inc. – Stock					X								X									X								P

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SCHEDULE III — ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Name David Lee Camp | Page 3 of 3

SP. DC. JT	BLOCK A Asset and/or Income Source	BLOCK B Year-End Value of Asset											BLOCK C Type of Income							BLOCK D Amount of Income											BLOCK E Transaction
		A None	B $1 – $1,000	C $1,001 – $15,000	D $15,001 – $50,000	E $50,001 – $100,000	F $100,001 – $250,000	G $250,001 – $500,000	H $500,001 – $1,000,000	I $1,000,001 – $5,000,000	J $5,000,001 – $25,000,000	K $25,000,001 – $50,000,000	L Over $50,000,000	DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Type of Income (Specify)	I None	II $1 – $200	III $201 – $1,000	IV $1,001 – $2,500	V $2,501 – $5,000	VI $5,001 – $15,000	VII $15,001 – $50,000	VIII $50,001 – $100,000	IX $100,001 – $1,000,000	X $1,000,001 – $5,000,000	XI Over $5,000,000	P, S, E
	Intel Corporation – Stock					X								X								X										
	Sara Lee Corporation – Stock					X								X									X									
	Sprint – Stock					X								X										X								
	MI State Empl. Deferred Comp.				X											X								X								
	Abbott Laboratories – Stock					X								X									X									P
	American Water Works Co.–Stock				X									X									X									
	Amgen – Stock				X									X							X											
	Walt Disney Co. – Stock				X									X								X										
	General Electric – Stock				X									X									X									
	Hewlett-Packard – Stock				X									X									X									
	Proctor & Gamble – Stock				X									X									X									
	401K – Dow Chemical Company						X							X			X					Not Applicable										
	Barnett Banks			X										X								X										P
	Commerce Bank Shares			X										X								X										P

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SCHEDULE IV — TRANSACTIONS

Name David Lee Camp

Report any purchase, sale, or exchange by you, your spouse, or dependent child during the reporting year of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child, or the purchase or sale of your personal residence, unless it is rented out.

SP, DC, JT	Asset	Type of Transaction: PURCHASE	SALE	EXCHANGE	Date (MO/DAY/YR)	Amount of Transaction: B $1,001–$15,000	C $15,001–$50,000	D $50,001–$100,000	E $100,001–$250,000	F $250,001–$500,000	G $500,001–$1,000,000	H $1,000,001–$5,000,000	I $5,000,001–$25,000,000	J $25,000,001–$50,000,000	K Over $50,000,000
SP	*Example* Mega Corporation Common Stock	X			10-12-97		X								
	McDonalds Corporation		X		07-15-97		X								
	A G Edwards - IRA - Self Directed														
	Seligman Henderson Global Fund		X		10-29-97		X								
	Seligman Growth Fund	X			10-29-97		X								
	A G Edwards - IRA - Rollover - Self Directed														
	May Department Stores		X		10-28-97	X									
	Seligman Growth Fund	X			10-29-97	X									
	Seligman CMMNCTNS and Information Fund		X		10-29-97	X									
	Barnett Banks	X			10-29-97	X									
	Barnett Banks	X			10-16-97	X									
	Commerce Bank Shares	X			10-16-97	X									
	Abbott Laboratories	X			02-21-97		X								
	Home Depot, Inc.	X			02-21-97	X									

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LEGISLATIVE RESOURCE CENTER
98 MAY 21 PM 3:14
OFFICE OF THE CLERK
U.S. HOUSE OF REPRESENTATIVES

0 197

HAND DELIVERED

May 18, 1998

The Clerk, U.S. House of Representatives
Legislative Resource Center
B-106 Cannon House Office Building
Washington, D.C. 20515

MC ✓

Dear Clerk of the House,

Please amend my Financial Disclosure Statements for 1995 and 1996, Schedule III:

Chemical Financial Corp./Stock, Year End Value of Asset-D $50,001-100,000.
Comerica/Stock, Year End Value of Asset-D $50,001-100,000.
Amer. Home Products/Stock, Year End Value of Asset-C $15,001-50,000.

Please amend my Financial Disclosure Statements for 1993 and 1994, Schedule III:

Chemical Financial Corp./Stock, Year End Value of Asset-D $50,001-100,000.
Amer. Home Products/Stock, Year End Value of Asset-C $15,001-50,000.

Please amend my Financial Disclosure Statements for 1991 and 1992, Schedule III:

Chemical Financial Corp./Stock, Year End Value of Asset-C $15,001-50,000.
Amer. Home Products/Stock, Year End Value of Asset-C $15,001-50,000.

Sincerely,

David Lee Camp

David Lee Camp
5901 Woodview Pass
Midland, MI 48642

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1997

Form A
For use by Members, officers and employees

98 MAY 15 PM 5:55

Thomas J Campbell
(Full Name)

2442 Rayburn House Office Building
(Mailing Address)

Washington DC 20515

Daytime Telephone 202-225-2631

HAND DELIVERED
(Office Use Only)

Filer Status	[X] Member of the U S House of Representatives	State CA District 15	[ ] Officer or Employee	Employing Office	
Report Type	[X] Annual (May 15)	[ ] Amendment		[ ] Termination	Termination Date

A $200 penalty shall be assessed against anyone who files more than 30 days late.

PRELIMINARY INFORMATION -- ANSWER EACH OF THESE QUESTIONS

I Did you or your spouse have "earned" income (e g , salaries or fees) of $200 or more from any source in the reporting period?
If yes, complete and attach Schedule I. Yes [X] No [ ]

II Did any individual or organization make a donation to charity in lieu of paying you for a speech, apppearance, or article in the reporting period?
If yes, complete and attach Schedule II. Yes [ ] No [X]

III Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period?
If yes, complete and attach Schedule III. Yes [X] No [ ]

IV Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset worth more than $1,000 in the reporting period?
If yes, complete and attach Schedule IV. Yes [X] No [ ]

V Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period?
If yes, complete and attach Schedule V. Yes [ ] No [X]

VI Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i e , aggregating more than $250 and not otherwise exempt)?
If yes, complete and attach Schedule VI. Yes [ ] No [X]

VII Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $250 from one source)?
If yes, complete and attach Schedule VII. Yes [X] No [ ]

VIII Did you hold any reportable positions on or before the date of filing in the current calendar year?
If yes, complete and attach Schedule VIII. Yes [X] No [ ]

IX Did you have any reportable agreement or arrangement with an outside entity?
If yes, complete and attach Schedule IX. Yes [X] No [ ]

Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION -- ANSWER EACH OF THESE QUESTIONS

TRUSTS- Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child? (See Instructions, pages 10-11) Yes [ ] No [X]

EXEMPTION Have you excluded from this report any other assets, "unearned" income transactions or liabilities of a spouse or dependent child because they meet all three tests for exemption? (See Instructions, page 11) Yes [ ] No [X]

CERTIFICATION -- THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct or its designee Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil penalties and criminal sanctions (See 5 U S C app 4 104 and 18 U S C 1001)

SIGNATURE OF REPORTING INDIVIDUAL *Note: Copy of 1997 income tax return attached at the end of this report.

Thomas J. Campbell

DATE (Month/Day/Year) 05/15/98

527

SCHEDULE I -- EARNED INCOME

List the source, type, and amount of earned income from any source (other than the filer's current employment by the U.S. Government) totalling $200 or more during the preceding calendar year. For a spouse, list the source and amount of any honoraria; list only the source for other spouse earned income exceeding $1,000. For further information, see Instructions, pages 12-13.

	Source	Type	Amount
Examples	Keene State	Approved Teaching Fee	$10,000
	State of Maryland	Legislative Pension	$9,000
	Civil War Roundtable (Oct 2nd)	Spouse Speech	$1,000
	Ontario County Board of Education	Spouse Salary	NA
	Stanford Law School, Stanford, CA	Salary	$2,105.04 *
	UC Berkeley HAAS School of Management, Berkeley, CA	Spouse's Salary	NA
	Atlas Corporatio	Spouse's Consulting Fees	NA
	Note: Spouse received no income in connection with Russian translation and travel assistance in August, 1997, provided by her to Century Steel Corp., of South Chicago, IL, but her travel costs and lodging were paid by Century Steel Corp.		
	*Valuation of employer contributions to dental and retirement benefits. No salary actually received		

For payments to charity in lieu of honoraria, use Schedule II.

SCHEDULE II -- PAYMENTS IN LIEU OF HONORARIA MADE TO CHARITY

List the source, activity (i.e., speech, appearance, or article), date, and amount of any payment made by the sponsor of an event to a charitable organization in lieu of an honorarium. A separate confidential list of charities receiving such payments must be filed directly with the Committe on Standards of Official Conduct. An envelope for transmitting the list is included in each Member's filing package. For further information, see Instructions, pages 13-14.

	Source	Activity	Date	Amount
Examples	Association of American Associations, Wash., D.C.	Speech	Feb. 2, 1994	$2,000
	XYZ Magazine	Article	Aug. 13, 1994	$500

SCHEDULE III -- ASSETS AND "UNEARNED" INCOME

BLOCK A **Asset and/or Income Source** Identify (a) each asset held for investment or production of income with a fair market value exceeding $1,000 at the end of the reporting year, and (b) any other asset or source of income which generated more than $200 in "unearned" income during the year. For rental property or land, provide an address. Provide full names of any mutual funds. For an IRA or retirement plan that is *self-directed*, list the underlying assets worth more than $1,000. For an IRA or retirement plan that is *not* self-directed, name the institution holding the account. **Exclude:** Your personal residence(s) (unless there is rental income), any debt owed to you by your spouse, or by your or your spouse's child, parent, or sibling, any deposits totalling $5,000 or less in personal savings accounts; any financial interests in or income derived from U.S. Government retirement programs. If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC) or is jointly held (JT), in the optional column on the far left. For further information, see Instructions, pages 14-20			BLOCK B **Value of Asset** at close of reporting year If you use a valuation method other than fair market value, please specify the method used. If an asset was sold and is included only because it generated income, the value should be "None."	BLOCK C **Type of Income** If other than one of the listed categories, specify the type of income by writing a brief description in this block.	BLOCK D **Amount of Income** For IRA's and retirement plans that are *not* self-directed, you may write in "NA" for income.	BLOCK E **Transaction** Indicate if asset was purchased(P), sold(S), or exchanged(E) in reporting year.
SP DC *Examples* JT	SP	Mega Corp. Stock 123 Main St., Dover, Del. 1st Bank of Paducah, KY accounts	$15,001 - $50,000 $250,000 - $500,000 $50,001 - $100,000	Dividends Rent Interest	$201 - $1,000 $1,001 - $2,500 $5,001 - $15,000	P
JT		Bungalow behind residence (665 Alvarado Row, Stanford, 94305)	$1,001 - $15,000	Rent	$5,001 - $15,000	NA
SP		***General Motors Corporation	$15,001 - $50,000	Dividends	$201 - $1,000	NA
SP		***Johnson & Johnson Corporation	$15,001 - $50,000	Capital Gains and Dividends	$201 - $1,000	NA
		SPS Transactions Corporation (stock options obtained over three years.)	unascertainable	none	-0-	Options voluntarily surrendered in 1996 included in 1997 form in error.
SP		***ITT Hartford Group, Inc.	$15,001 - $50,000	Dividends	$201 - $1,000	NA
SP		***McDonald's Corporation	$1,001 - $15,000	Dividends	$1 - $200	NA

SCHEDULE III -- ASSETS AND "UNEARNED" INCOME

JT	Wells Fargo Checking Account	$1,001 - $15,000	Interest	$1 - $200	NA
JT	Wells Fargo Savings Account	$15,001 - $50,000	Interest	$201 - $1,000	S
	Wells Fargo Checking Account	$1,001 - $15,000	Interest	$1 - $200	NA
	Charles Schwab	$1 - $1,000	Interest	$201 - $1,000	NA
SP	The Reserve Fund (Ferris Baker Watts)	$1,001 - $15,000	Dividends	$201 - $1,000	S
	Lincoln National Life	$1 - $1,000	Dividends	$1 - $200	NA
SP	***Washington Mutual Fund	$15,001 - $50,000	Dividends	$201 - $1,000	NA
SP	First Virginia Bank Account	$1,001 - $15,000	Interest	$1 - $200	NA
SP	***Wheat First Money Market	$1,001 - $15,000	Dividends	$1 - $200	P/S
SP	Georgian Wines I. L. C.	$15,001 - $50,000	Dividends	$1 - $200	NA
SP	***MFS Municipal Bond Fund Class A	$15,001 - $50,000	Interest	$201 - $1,000	NA
SP	***COMPAQ Computer Corp Stock	$1,001 - $15,000	Dividends	$1 - $200	NA
SP	***Franklin Resources Stock	$15,001 - $50,000	Dividends	$1 - $200	NA
SP	***UCG Inc. Stock	$1,001 - $15,000	Dividends	None	P
SP	***Pfizer Stock	$1,001 - $15,000	Dividends	$1 - $200	P
SP	***New Perspective Mutual Fund	$50,001 - $100,000	Interest	$201 - $1,000	P
SP	CBS Corp. Stock	$1,001 - $15,000	Dividends	$1 - $200	P
SP	Lehman Bros. Holdings	$1,001 - $15,000	Dividends	$1 - $200	P
	Those securities marked *** are in the Susanne M. Campbell Family Ltd. Partnership	None	Rent	None	NA
SP	30% Interest in Family Limited Partnership	$500,001 - $1,000,000	Partnership Income	$5,001 - $15,000	(P) Gift

SCHEDULE III -- ASSETS AND "UNEARNED" INCOME

	SCHEDULE III -- ASSETS AND UNEARNED INCOMED CONTINUED ON NEXT SHEET.	None	none	None	NA
SP	Martin Family Trust	$250,001 - $500,000	Remainder Interest	None	NA

SCHEDULE III -- ASSETS AND "UNEARNED" INCOME-continued

30% Interest in Family Limited Partnership--continued

Ameritech Corp New	$ 15,001-50,000
Bell Atlantic Corp	$ 15,001-50,000
Campbell Soup Company	$ 1,001-15,000
Coca-Cola Company	$ 50,000-100,000
Compaq Computer corp	$ 1,001-15,000
Du Pont E.I. De Nemours & Co.	$ 50,000-100,00
Equitable Cos. Inc.	$ 1,001-15,000
Exxon Corp	$100,000-250,000
Federal National Mtg. Assn.	$ 1,001-15,000
First Union Corp	$ 1,001-15,000
Fleet Financial Group Inc.	$ 1,001-15,000
Franklin Resources Inc.	$ 1,001-15,000
Hldgs. Inc. PFD Series D Fresenius Medical Care FMS ADR	$ 1,001-15,000
Gannett Co. Inc. DFI	$100,000-250,000
General Electric Company	$ 1,001-15,000
Gillett Co.	$ 1,001-15,000
Grace W.R. & Co.	$ 1,001-15,000
Halliburton Company	$ 1,001-15,000
Hartford Financial Services Group	$ 15,001-50,000
Intel Corp	$ 1,001-15,000
Lehman Brothers Holdings Inc.	$ 1,001-15,000
Eli Lilly & Co.	$ 15,001-50,000
Pfizer Incorporated	$ 1,001-15,000
Rowan Companies Inc.	$ 1,001-15,000
Schering Plough Corp	$ 15,001-50,000
Sealed Air Corp New PFD Conv. Ser A	$ 1,001-15,000
Sealed Air Corp New	$ 1,001-15,000
Travelers Group Inc.	$ 1,001-15,000
Fidelity Advisor	$ 15,001-50,000
MFS VA Muni Bond Fund	$ 15,001-50,000
Nuveen Municipal Income Fund Inc.	$ 1,001-15,000

Martin Family Trust--continued

First Virginia Bank Discretionary Fixed Income Common Trust Fund	$100,000-250,000
First Virginia Bank Discretionary Common Stock Common Trust Fund	$100,000-250,000
First Virginia Short Term Investment Pool	$ 15,001-50,000

SCHEDULE IV -- TRANSACTIONS

Report any purchase, sale, or exchange by you, your spouse, or dependent child during the reporting year of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child, or the purchase or sale of your personal residence, unless it is rented out. For further information, see Instructions, pages 20-21.

SP,DC,JT	Asset	Type of Transaction	Date	Amount of Transaction
	Example Mega Corporation Common Stock	Purchase	10/12/94	$15,001 - $50,000
	SPS Transaction Services, Inc (Common Stock, upon exercise of option)		Options voluntarily surrendered in 1996 Included in 1997 form in error	
SP	Wheat First Money market	Purchases and sales in connection with securities.	Throughout the year	$1,001 - $15,000
SP	Martin Family Trust & Certain Family Ltd. Partnerships	Receipt of gift of shares	Throughout the year	$15,001 - $50,000
SP	LECG Inc Stock	Purchase	1/1/97	$1,001 - $15,000
SP	Pfizer Stock	Purchase	1/1/97	$1,001 - $15,000
SP	New Perspective Mutual Fund	Purchase	1/1/97	$50,001 - $100,000
SP	CBS Corp Stock	Purchase	1/1/97	$1,001 - $15,000
SP	Lehman Bros Holdings	Purchase	1/1/97	$1,001 - $15,000

SCHEDULE V -- LIABILITIES

Report liabilities of over $10,000 owed to any one creditor ***at any time*** during the reporting period by you, your spouse, or dependent child Mark the highest amount owed during the year
Exclude: Any mortgage on your personal residence (unless it is rented out); loans secured by automobiles, household furniture, or appliances, and liabilities owed to a spouse, or the child, parent, or sibling of you or your spouse Report ***revolving charge accounts*** only if the balance at the end of the reporting period exceeded $10,000 For further information, see Instructions, pages 21-22

SP,DC,JT	Creditor	Type of Liability	Amount of Liability
	Example First Bank of Wilmington, Delaware	Mortgage on 123 Main St , Dover, Del	$100,001 - $250,000

SCHEDULE VI -- GIFTS

Report the source, a brief description, and the value of all gifts totalling more than $250 received by you, your spouse, or a dependent child from any source during the year.
Exclude: Gifts from relatives, gifts of personal hospitality of an individual, local meals, and gifts to a spouse or dependent child that are totally independent of his or her relationship to you. Gifts with a value of $100 or less need not be added towards the $250 disclosure threshold.
Note: The gift rule (House Rule 52 in the 104th Congress, renumbered as House Rule 51 of the 105th Congress) prohibits gifts except as specifically provided in the rule.
For further information, see Instructions, pages 22-24

Source	Description	Value
Example: Mr. Joseph H. Smith, Anytown, Anystate	Silver Platter (waiver received from Committee on Standards)	$270

SCHEDULE VII -- TRAVEL PAYMENTS AND REIMBURSEMENTS

Identify the source and list travel itinerary, dates, and nature of expenses provided for travel and travel-related expenses totalling more than $250 received by you, your spouse, or a dependent child during the reporting period. Indicate whether a family member accompanied the traveler at the sponsor's expense, and the amount of time, if any, that was not at the sponsor's expense. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor
Exclude: Travel-related expenses provided by federal, state and local governments, or by a foreign government required to be separately reported under the Foreign Gifts and Decorations Act (5 U.S.C. 7342); travel paid for by a Federal political committee; travel provided to a spouse or dependent child that is totally independent of his or her relationship to you. For further information, see Instructions, pages 24-26

Source	Date(s)	Point of Departure--Destination--Point of Return	Lodging? (Y/N)	Food? (Y/N)	Was a Family Member Included? (Y/N)	Any time not at sponsor's expense
Examples Chicago Chamber of Commerce	Mar 2	Wash , D C -Chicago-Wash , D C	N	N	N	N
Mega Corporation	Aug 6-13	Wash , D C -Los Angeles-Cleveland	Y	Y	Y	4 Days
Aspen Institute	March 7-9, 1997	DC-Hershey, Pa -DC	Y	Y	Y	none
Stanford Alumni Association	April 3-7, 1997	DCA-Atlanta-SFO-DCA	Y	N	N	none
Pacific Research Institute	July 17-20, 1997	DCA-SFO-DCA	Y	Y	Y	none
Human Rights Project	August 23-31, 1997	DCA-Havana, Cuba-DCA	Y	Y	Y	none
Western League of Savings	September 15, 1997	SFO	Y	N	N	none
Independent Bankers Association of America	November 1-2, 1997	SFO-San Diego-SFO	N	N	N	none
Renaissance Weekend	Dec. 28, 1997-Jan 1, 1998	DCA-SC-DCA	Y	Y	Y	none

SCHEDULE VIII -- POSITIONS

Report all positions, compensated or uncompensated, held during the current calendar year as an officer, director, trustee of an organization, partner, proprietor, representative, employee, or consultant of any corporation, firm, partnership, or other business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States. For further information, see Instructions, page 26.

Exclude: Positions held in any religious, social, fraternal, or political entities, positions solely of an honorary nature, and positions listed on Schedule I.

Position	Organization
Professor (on leave)	Stanford Law School

SCHEDULE IX -- AGREEMENTS

Identify the date, parties to, and general terms of any agreement or arrangement with respect to future employment, a leave of absence during the period of government service, continuation or deferral of payments by a former or current employer other than the U S Government, or continuing participation in an employee welfare or benefit plan maintained by a former employer For further information, see Instructions, pages 26-27.

Date	Parties To	Terms of Agreement
Indefinite	Stanford University and Tom Campbell	Tenured faculty member on leave, right to live on campus, right to return to salaried position, employer contributions to dental and retirement plans continu while on leave No actual salary received

FORM **1040** Department of the Treasury – Internal Revenue Service
U.S. Individual Income Tax Return **1997**
(99) IRS Use Only – Do not write or staple in this space

For the year Jan. 1 – Dec. 31, 1997, or other tax year beginning , 1997, ending , 19 — OMB No. 1545-0074

Label (See instructions on page 10.) Use the IRS label. Otherwise, please print or type.

LABEL HERE

THOMAS J. CAMPBELL
SUSANNE M. CAMPBELL
20721 HENWOOD RD.
SAN JOSE, CA 95123

Your social security number: 347-38-4500
Spouse's social security number: 223-86-9242
For help finding line instructions, see pages 2 and 3 in the booklet.

Presidential Election Campaign (See page 10.)

	Yes	No
Do you want $3 to go to this fund?	X	
If a joint return, does your spouse want $3 to go to this fund?		X

Note: Checking "Yes" will not change your tax or reduce your refund.

Filing Status — Check only one box.

1 [ ] Single
2 [X] Married filing joint return (even if only one had income)
3 [ ] Married filing separate return. Enter spouse's soc. sec. no. above & full name here ▶
4 [ ] Head of household (with qualifying person). (See page 10.) If the qualifying person is a child but not your dependent, enter this child's name here ▶
5 [ ] Qualifying widow(er) with dependent child (year spouse died ▶ 19). (See page 10.)

Exemptions

6a [X] **Yourself.** If your parent (or someone else) can claim you as a dependent on his or her tax return, do not check box 6a — No. of boxes checked on 6a and 6b: 2
b [X] **Spouse**
c **Dependents:** (1) First Name, Last name | (2) Dependent's social security number | (3) Dependent's relationship to you | (4) No. of mos. lived in your home in 1997 — No. of your children on 6c who: ● lived with you ● did not live with you due to divorce or separation (see page 11) — Dependents on 6c not entered above

If more than six dependents, see page 10

d Total number of exemptions claimed — Add numbers entered on lines above ▶ 2

Income	7	Wages, salaries, tips, etc. Attach Form(s) W-2	7	161,754
	8a	**Taxable** interest. Attach Schedule B if required	8a	133
	b	**Tax-exempt** interest. DO NOT include on line 8a. ST. 2. 8b: 3,899		
Attach Copy B of your Forms W-2, W-2G, and 1099-R here.	9	Dividends. Attach Schedule B if required	9	10,290
	10	Taxable refunds, credits, or offsets of state and local income taxes (see page 12)	10	
	11	Alimony received	11	
	12	Business income or (loss). Attach Schedule C or C-EZ	12	
If you did not get a W-2, see page 12.	13	Capital gain or (loss). Attach Schedule D	13	18,859
	14	Other gains or (losses). Attach Form 4797	14	
	15a	Total IRA distributions — 15a — b Taxable amount (see pg. 13)	15b	
Enclose, but do not attach, any payment. Also, please use Form 1040-V.	16a	Total pensions and annuities — 16a — b Taxable amount (see pg. 13)	16b	
	17	Rental real estate, royalties, partnerships, S corporations, trusts, etc. Attach Schedule E	17	3,804
	18	Farm income or (loss). Attach Schedule F	18	
	19	Unemployment compensation	19	
	20a	Social security benefits — 20a — b Taxable amount (see pg. 14)	20b	
	21	Other income.	21	
	22	Add the amounts in the far right column for lines 7 through 21. This is your **total income** ▶	22	194,840
Adjusted Gross Income	23	IRA deduction (see page 16)	23	
	24	Medical savings account deduction. Attach Form 8853	24	
	25	Moving expenses. Attach Form 3903 or 3903-F	25	
	26	One-half of self-employment tax. Attach Schedule SE	26	
	27	Self-employed health insurance deduction (see page 17)	27	
	28	Keogh and self-employed SEP and SIMPLE plans	28	
If line 32 is under $29,290 (under $9,970 if a child did not live with you), see EIC inst. on page 21.	29	Penalty on early withdrawal of savings	29	
	30	Alimony paid. b Recipient's SSN ▶	30a	
	31	Add lines 23 through 30a	31	0
	32	Subtract line 31 from line 22. This is your **adjusted gross income** ▶	32	194,840

For Privacy Act and Paperwork Reduction Act Notice, see page 38. Form **1040** (1997)

Form 1040 (1997) THOMAS J. AND SUSANNE M. CAMPBELL 347-38-4500 Page 2

Tax Computation

33	Amount from line 32 (adjusted gross income)		33	194,840
34	a Check if: ☐ You were 65 or older, ☐ Blind; ☐ Spouse was 65 or older, ☐ Blind. Add the number of boxes checked above and enter the total here ▶ 34a			
	b If you are married filing separately and your spouse itemizes deductions or you were a dual-status alien, see page 18 and check here ▶ 34b ☐			
35	Enter the larger of your: **Itemized deductions** from Schedule A, line 28, OR **Standard deduction** shown below for your filing status. But see page 18 if you checked any box on line 34a or 34b or someone can claim you as a dependent. ● Single – $4,150 ● Married filing jointly or Qualifying widow(er) – $6,900 ● Head of household – $6,050 ● Married filing separately – $3,450		35	40,381
36	Subtract line 35 from line 33		36	154,459
37	If line 33 is $90,900 or less, multiply $2,650 by the total number of exemptions claimed on line 6d. If line 33 is over $90,900, see the worksheet on page 19 for the amount to enter		37	4,664
38	**Taxable income.** Subtract line 37 from line 36. If line 37 is more than line 36, enter -0-		38	149,795
39	**Tax.** See page 19. Check if any tax from a ☐ Form(s) 8814 b ☐ Form 4972 ▶		39	37,127

If you want the IRS to figure your tax, see page 18.

Credits

40	Credit for child and dependent care expenses. Att. Form 2441	40		
41	Credit for the elderly or the disabled. Attach Schedule R	41		
42	Adoption credit. Attach Form 8839	42		
43	Foreign tax credit. Attach Form 1116	43	104	
44	Other. Check if from a ☐ Form 3800 b ☐ Form 8396 c ☐ Form 8801 d ☐ Form (specify)	44		
45	Add lines 40 through 44		45	104
46	Subtract line 45 from line 39. If line 45 is more than line 39, enter -0- ▶		46	37,023

Other Taxes

47	Self-employment tax. Att. Sch. SE		47	
48	Alternative minimum tax. Attach Form 6251		48	
49	Social security and Medicare tax on tip income not reported to employer. Attach Form 4137		49	
50	Tax on qualified retirement plans (including IRAs) and MSAs. Attach Form 5329 if required		50	
51	Advance earned income credit payments from Form(s) W-2		51	
52	Household employment taxes. Attach Schedule H		52	
53	Add lines 46 through 52. This is your **total tax** ▶		53	37,023

Payments

Attach Forms W-2, W-2G, and 1099-R on the front.

54	Federal income tax withheld from Forms W-2 and 1099	54	31,566	
55	1997 estimated tax payments and amount applied from 1996 return	55		
56	a **Earned income credit.** Att. Sch. EIC if you have a qualifying child. b Nontaxable earned income: amt. ▶ and type ▶ NO	56a		
57	Amount paid with Form 4868 (request for extension)	57		
58	Excess social security and RRTA tax withheld (see page 27)	58	134	
59	Other payments. Check if from a ☐ Form 2439 b ☐ Form 4136	59		
60	Add lines 54, 55, 56a, 57, 58, and 59. These are your **total payments** ▶		60	31,700

Refund

Have it directly deposited! See page 27 and fill in 62b, 62c, and 62d.

61	If line 60 is more than line 53, subtract line 53 from line 60. This is the amount you **OVERPAID**	61	
62a	Amount of line 61 you want **REFUNDED TO YOU** ▶	62a	
b	Routing number ☐ c Type: ☐ Checking ☐ Savings		
d	Account number		
63	Amount of line 61 you want **APPLIED TO 1998 ESTIMATED TAX** ▶ 63		

Amount You Owe

64	If line 53 is more than line 60, subtract line 60 from line 53. This is the **AMOUNT YOU OWE.** For details on how to pay, see page 27 ▶		64	5,420
65	**Estimated tax penalty.** Also include on line 64	65	97	

Sign Here

Keep a copy of this return for your records.

Under penalties of perjury, I declare that I have examined this return and accompanying schedules and statements, and to the best of my knowledge and belief, they are true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge.

Your signature	Date	Your occupation	PROF./CONGRESSMAN
Spouse's signature. If a joint return, BOTH must sign.	Date	Spouse's occupation	UNIV ADMINISTRATOR

Paid Preparer's Use Only

Preparer's signature	PAUL D. HANCOCK Hancock	Date 4/10/98	Check if self-employed ☒	Preparer's social security no. 492-50-6760
Firm's name (or yours if self-employed) and address	PAUL D. HANCOCK, CPA 655 SKYWAY ROAD, SUITE 215 SAN CARLOS, CA		EIN 77-0293779	ZIP code 94070

Form **2210**

Department of the Treasury
Internal Revenue Service

Underpayment of Estimated Tax by Individuals, Estates, and Trusts

▶ See separate instructions.

▶ Attach to Form 1040, 1040A, 1040NR, 1040NR-EZ, or 1041.

OMB No. 1545-0140

1997

Attachment Sequence No. 06

Name(s) shown on tax return

THOMAS J. AND SUSANNE M. CAMPBELL

Identifying number

347-38-4500

Note: In most cases, you **do not** need to file Form 2210. The IRS will figure any penalty you owe and send you a bill. File Form 2210 **only** if one or more boxes in Part I apply to you. If you do not need to file Form 2210, you still may use it to figure your penalty. Enter the amount from line 20 or line 32 on the penalty line of your return, but **do not** attach Form 2210.

Part I Reasons for Filing – If 1a, b, or c below applies to you, you may be able to lower or eliminate your penalty. But you MUST check the boxes that apply and file Form 2210 with your tax return. If 1d below applies to you, check that box and file Form 2210 with your tax return.

1 Check whichever boxes apply (if none apply, see the **Note** above):

a ☐ You request a **waiver.** In certain circumstances, the IRS will waive all or part of the penalty. See **Waiver of Penalty** on page 1 of the instructions.

b ☐ You use the **annualized income installment method.** If your income varied during the year, this method may reduce the amount of one or more required installments. See page 4 of the instructions.

c ☐ You had Federal income tax withheld from wages and, for estimated tax purposes, you treat the withheld tax as paid on the dates it was actually withheld, instead of in equal amounts on the payment due dates. See the instructions for line 22 on page 3.

d ☐ Your required annual payment (line 13 below) is based on your 1996 tax and you filed or are filing a joint return for either 1996 or 1997 but not for both years.

Part II Required Annual Payment

2	Enter your 1997 tax after credits (see page 2 of the instructions). **Caution:** Also see page 2 for a special rule if claiming the research credit			2	37,023
3	Other taxes (see page 2 of the instructions)			3	
4	Add lines 2 and 3			4	37,023
5	Earned income credit	5			
6	Credit for Federal tax paid on fuels	6			
7	Add lines 5 and 6			7	0
8	Current year tax. Subtract line 7 from line 4			8	37,023
9	Multiply line 8 by 90% (.90)	9	33,321		
10	Withholding taxes. **Do not** include any estimated tax payments on this line (see page 2 of the instructions)			10	31,700
11	Subtract line 10 from line 8. If less than $500, stop here; **do not** complete or file this form. You do not owe the penalty			11	5,323
12	Enter the tax shown on your 1996 tax return (110% of that amount if the adjusted gross income shown on that return is more than $150,000, or if married filing separately for 1997, more than $75,000). **Caution:** See page 2 of the instructions			12	43,926
13	**Required annual payment.** Enter the **smaller** of line 9 or line 12 **Note:** If line 10 is equal to or more than line 13, stop here; you do not owe the penalty. Do not file Form 2210 unless you checked box 1d above.			13	33,321

Part III Short Method (**Caution:** See page 2 of the instructions to find out if you can use the short method. If you checked box **1b** or **c** in Part I, skip this part and go to Part IV.)

14	Enter the amount, if any, from line 10 above	14	31,700		
15	Enter the total amount, if any, of estimated tax payments you made	15			
16	Add lines 14 and 15			16	31,700
17	**Total underpayment for year.** Subtract line 16 from line 13. If zero or less, stop here; you do not owe the penalty. Do not file Form 2210 unless you checked box 1d above			17	1,621
18	Multiply line 17 by .05986			18	97
19	• If the amount on line 17 was paid **on or after** 4/15/98, enter –0–. • If the amount on line 17 was paid **before** 4/15/98, make the following computation to find the amount to enter on line 19. Amount on line 17 x Number of days paid before 4/15/98 x .00025			19	0
20	**PENALTY.** Subtract line 19 from line 18. Enter the result here and on Form 1040, line 65; Form 1040A, line 34; Form 1040NR, line 65; Form 1040NR-EZ, line 26; or Form 1041, line 27 ▶			20	97

SCHEDULES A&B (Form 1040)
Department of the Treasury Internal Revenue Service (99)

Schedule A – Itemized Deductions

▶ Attach to Form 1040. ▶ See Instructions for Schedules A and B (Form 1040).

OMB No. 1545-0074
1997
Attachment Sequence No. 07

Name(s) shown on Form 1040: THOMAS J. AND SUSANNE M. CAMPBELL

Your social security number: 347-38-4500

Medical and Dental Expenses

Caution: Do not include expenses reimbursed or paid by others.

1	Medical and dental expenses (see page A-1)	1			
2	Enter amount from Form 1040, line 33	2			
3	Multiply line 2 above by 7.5% (.075)	3			
4	Subtract line 3 from line 1. If line 3 is more than line 1, enter -0-			4	0

Taxes You Paid (See page A-1.)

5	State and local income taxes	5	11,296		
6	Real estate taxes (see page A-2)	6	4,352		
7	Personal property taxes	7	151		
8	Other taxes. List type and amount ▶	8			
9	Add lines 5 through 8			9	15,799

Interest You Paid (See page A-2.)

Note: Personal interest is not deductible.

10	Home mortgage interest and points reported on Form 1098 ..ST. 3...	10	23,530		
11	Home mortgage interest not reported on Form 1098. If paid to the person from whom you bought the home, see page A-3 & show that person's name, ID no. & address ▶	11			
12	Points not reported on Form 1098. See page A-3	12			
13	Investment interest. Attach Form 4952, if required. (See page A-3) ..SEE STATEMENT 4..	13	18		
14	Add lines 10 through 13			14	23,548

Gifts to Charity If you made a gift and got a benefit for it, see page A-3.

15	Gifts by cash or check. If any gift of $250 or more, see pg. A-3 ST. 5.	15	1,950		
16	Other than by cash or check. If any gift of $250 or more, see page A-3. You MUST attach Form 8283 if over $500	16			
17	Carryover from prior year	17			
18	Add lines 15 through 17			18	1,950

Casualty and Theft Losses

19	Casualty or theft loss(es). Attach Form 4684. (See page A-4.)			19	0

Job Expenses and Most Other Miscellaneous Deductions (See page A-5 for expenses to deduct here.)

20	Unreimbursed employee expenses – job travel, union dues, job education, etc. You MUST attach Form 2106 or 2106-EZ if required. (See page A-4.) ▶ DEPRECIATION 444; PROFESSIONAL SUBSCRIPTION 695; UNION & PROFESSIONAL DUES 145	20	1,284		
21	Tax preparation fees	21	650		
22	Other expenses – investment, safe deposit box, etc. List type and amount ▶ COLOR PRINTER 206; INVESTMENT EXP. FROM K-1 30; MAXIMUM CONGRESSIONAL EXP 3,000; SAFE DEPOSIT BOX RENTAL 20	22	3,256		
23	Add lines 20 through 22	23	5,190		
24	Enter amount from Form 1040, line 33 ... 194,840				
25	Multiply line 24 above by 2% (.02)	25	3,897		
26	Subtract line 25 from line 23. If line 25 is more than line 23, enter -0-			26	1,293

Other Miscellaneous Deductions

27	Other – from list on page A-5. List type and amount ▶			27	0

Total Itemized Deductions

28. Is Form 1040, line 33, over $121,200 (over $60,600 if married filing separately)?
NO. Your deduction is not limited. Add the amounts in the far right column for lines 4 through 27. Also, enter on Form 1040, line 35, the larger of this amount or your standard deduction. } ▶ REDUCTION -2,209 → 28: 40,381
YES. Your deduction may be limited. See page A-5 for the amount to enter.

Schedules A&B (Form 1040) 1997 — OMB No. 1545-0074 — Page 2

Name(s) shown on Form 1040. Do not enter name and social security number if shown on other side. — Your social security number

THOMAS J. AND SUSANNE M. CAMPBELL — 347-38-4500

Schedule B – Interest and Dividend Income

Attachment Sequence No. 08

Part I Interest Income (See pages 12 and B-1)

Note: If you had over $400 in taxable interest income, you must also complete Part III.

			Amount
1	List name of payer. If any interest is from a seller-financed mortgage and the buyer used the property as a personal residence, see page B-1 and list this interest first. Also, show that buyer's social security number and address ▶		
	FIRST VIRGINIA BANK	1	133
2	Add the amounts on line 1	2	133
3	Excludable interest on series EE U.S. savings bonds issued after 1989 from Form 8815, line 14. You MUST attach Form 8815 to Form 1040	3	
4	Subtract line 3 from line 2. Enter the result here and on Form 1040, line 8a ▶	4	133

Note: If you received a Form 1099-INT, Form 1099-OID, or substitute statement from a brokerage firm, list the firm's name as the payer and enter the total interest shown on that form.

Part II Dividend Income (See pages 12 and B-1)

Note: If you had over $400 in gross dividends and/or other distributions on stock, you must also complete Part III.

			Amount
5	List name of payer. Include gross dividends and/or other distributions on stock here. Any capital gain distributions and nontaxable distributions will be deducted on lines 7 and 8		
	▶ KATHLEEN M. COLE FAMILY L.P.	5	6,641
	SUSANNE M. CAMPBELL FAMILY L.P. LTD PTR		3,463
	SUZANNE M. CAMPBELL FAMILY L.P. GEN PTR		72
	WHEAT FIRST		114
6	Add the amounts on line 5	6	10,290
7	Capital gain distributions. Enter here and on Schedule D — 7		
8	Nontaxable distributions. (See the inst. for Form 1040, line 9.) — 8		
9	Add lines 7 and 8	9	
10	Subtract line 9 from line 6. Enter the result here and on Form 1040, line 9 ▶	10	10,290

Note: If you received a Form 1099-DIV or substitute statement from a brokerage firm, list the firm's name as the payer and enter the total dividends shown on that form.

Part III Foreign Accounts and Trusts (See page B-2)

You must complete this part if you (a) had over $400 of interest or dividends; (b) had a foreign account; or (c) received a distribution from, or were a grantor of, or a transferor to, a foreign trust.

		Yes	No
11a	At any time during 1997, did you have an interest in or a signature or other authority over a financial account in a foreign country, such as a bank account, securities account, or other financial account? See page B-2 for exceptions and filing requirements for Form TD F 90-22.1		X
b	If "Yes," enter the name of foreign country ▶		
12	During 1997, did you receive a distribution from, or were you the grantor of, or transferor to, a foreign trust? If "Yes," you may have to file Form 3520 or 926. See page B-2		X

KFA For Paperwork Reduction Act Notice, see Form 1040 Instructions. — Schedule B (Form 1040) 1997

SCHEDULE D (Form 1040)

Department of the Treasury Internal Revenue Service (99)

Capital Gains and Losses

▶ Attach to Form 1040. ▶ See Instructions for Schedule D (Form 1040).

▶ Use Schedule D–1 for more space to list transactions for lines 1 and 8.

OMB No. 1545-0074

1997

Attachment Sequence No. 12

Name(s) shown on Form 1040: THOMAS J. AND SUSANNE M. CAMPBELL

Your social security number: 347-38-4500

Part I Short-Term Capital Gains and Losses – Assets Held One Year or Less

(a) Description of property (Example, 100 sh. XYZ Co.)	(b) Date acquired (Mo., day, yr.)	(c) Date sold (Mo., day, yr.)	(d) Sales price (see page D–3)	(e) Cost or other basis (see page D–4)	(f) GAIN or (LOSS) FOR ENTIRE YEAR. Subtract (e) from (d)

2	Enter your short-term totals, if any, from Schedule D–1, line 2	2	
3	**Total short-term sales price amounts.** Add column (d) of lines 1 and 2	3	
4	Short-term gain from Forms 2119 and 6252, and short-term gain or (loss) from Forms 4684, 6781, and 8824	4	
5	Net short-term gain or (loss) from partnerships, S corporations, estates, and trusts from Schedule(s) K–1	5	-668
6	Short-term capital loss carryover. Enter the amount, if any, from line 9 of your 1996 Capital Loss Carryover Worksheet	6	( )
7	**Net short-term capital gain or (loss).** Combine lines 1 through 6 in column (f) ▶	7	-668

Part II Long-Term Capital Gains and Losses – Assets Held More Than One Year

(a) Description of property (Example, 100 sh. XYZ Co.)	(b) Date acquired (Mo., day, yr.)	(c) Date sold (Mo., day, yr.)	(d) Sales price (see page D–3)	(e) Cost or other basis (see page D–4)	(f) GAIN or (LOSS) FOR ENTIRE YEAR. Subtract (e) from (d)	(g) 28% RATE GAIN or (LOSS) * (see instr. below)

9	Enter your long-term totals, if any, from Schedule D–1, line 9	9		
10	**Total long-term sales price amounts.** Add column (d) of lines 8 and 9	10		
11	Gain from Form 4797, Part I; long-term gain from Forms 2119, 2439, and 6252; and long-term gain or (loss) from Forms 4684, 6781, and 8824	11		
12	Net long-term gain or (loss) from partnerships, S corporations, estates, and trusts from Schedule(s) K–1	12	19,527	14,529
13	Capital gain distributions	13		
14	Long-term capital loss carryover. Enter in both columns (f) and (g) the amount, if any, from line 14 of your 1996 Capital Loss Carryover Worksheet	14	( )	( )
15	Combine lines 8 through 14 in column (g)	15		14,529
16	**Net long-term capital gain or (loss).** Combine lines 8 through 14 in column (f) ▶	16	19,527	

* **28% Rate Gain or Loss** includes all gains and losses in Part II, column (f) from sales, exchanges, or conversions (including installment payments received) either:

- **Before** May 7, 1997, or
- **After** July 28, 1997, for assets held more than 1 year but not more than 18 months.

It also includes **ALL** "collectibles gains and losses" (as defined on page D–4).

Schedule D (Form 1040) 1997 THOMAS J. AND SUSANNE M. CAMPBELL 347-38-4500 Page 2

Part III Summary of Parts I and II

17	Combine lines 7 and 16. If a loss, go to line 18. If a gain, enter the gain on Form 1040, line 13	17	18,859
	Next: Complete Form 1040 through line 38. Then, go to **Part IV** to figure your tax if: • Both lines 16 and 17 are gains, **and** • Form 1040, line 38, is more than zero.		
18	If line 17 is a loss, enter here and as a (loss) on Form 1040, line 13, the **smaller** of these losses. • The loss on line 17, **or** • ($3,000) or, if married filing separately, ($1,500)	18	( )
	Next: Complete Form 1040 through line 36. Then, complete the **Capital Loss Carryover Worksheet** on page D–4 if: • The loss on line 17 exceeds the loss on line 18, or • Form 1040, line 36, is a loss.		

Part IV Tax Computation Using Maximum Capital Gains Rates

19	Enter your taxable income from Form 1040, line 38			19	149,795
20	Enter the **smaller** of line 16 or line 17	20	18,859		
21	If you are filing Form 4952, enter the amount from Form 4952, line 4e	21			
22	Subtract line 21 from line 20. If zero or less, enter –0–	22	18,859		
23	Combine lines 7 and 15. If zero or less, enter –0–	23	13,861		
24	Enter the **smaller** of line 15 or line 23, but not less than zero	24	13,861		
25	Enter your unrecaptured section 1250 gain, if any (see page D–4)	25			
26	Add lines 24 and 25	26	13,861		
27	Subtract line 26 from line 22. If zero or less, enter –0–			27	4,998
28	Subtract line 27 from line 19. If zero or less, enter –0–			28	144,797
29	Enter the **smaller** of line 19 or $41,200 ($24,650 if single; $20,500 if married filing separately; $33,050 if head of household)			29	41,200
30	Enter the **smaller** of line 28 or line 29			30	41,200
31	Subtract line 22 from line 19. If zero or less, enter –0–			31	130,936
32	Enter the **larger** of line 30 or line 31			32	130,936
33	Figure the tax on the amount on line 32. Use the Tax Table or Tax Rate Schedules, whichever applies ▶			33	32,246
34	Enter the amount from line 29			34	41,200
35	Enter the amount from line 28			35	144,797
36	Subtract line 35 from line 34. If zero or less, enter –0–			36	0
37	Multiply line 36 by 10% (.10) ▶			37	
38	Enter the **smaller** of line 19 or line 27			38	4,998
39	Enter the amount from line 36			39	
40	Subtract line 39 from line 38. If zero or less, enter –0–			40	4,998
41	Multiply line 40 by 20% (.20) ▶			41	1,000
42	Enter the **smaller** of line 22 or line 25			42	
43	Add lines 22 and 32	43	149,795		
44	Enter the amount from line 19	44	149,795		
45	Subtract line 44 from line 43. If zero or less, enter –0–			45	0
46	Subtract line 45 from line 42. If zero or less, enter –0–			46	0
47	Multiply line 46 by 25% (.25) ▶			47	
48	Enter the amount from line 19			48	149,795
49	Add lines 32, 36, 40, and 46			49	135,934
50	Subtract line 49 from line 48			50	13,861
51	Multiply line 50 by 28% (.28) ▶			51	3,881
52	Add lines 33, 37, 41, 47, and 51			52	37,127
53	Figure the tax on the amount on line 19. Use the Tax Table or Tax Rate Schedules, whichever applies			53	38,092
54	**Tax.** Enter the **smaller** of line 52 or line 53 here and on Form 1040, line 39 ▶			54	37,127

SCHEDULE E (Form 1040)
Department of the Treasury Internal Revenue Service (99)

Supplemental Income and Loss

(From rental real estate, royalties, partnerships, S corporations, estates, trusts, REMICs, etc.)

▶ Attach to Form 1040 or Form 1041. ▶ See Instructions for Schedule E (Form 1040).

OMB No. 1545-0074

1997

Attachment Sequence No 13

Name(s) shown on return: THOMAS J. AND SUSANNE M. CAMPBELL

Your social security number: 347-38-4500

Part I **Income or Loss From Rental Real Estate and Royalties** Note: Report income and expenses from your business of renting personal property on Schedule C or C-EZ (see page E-1). Report farm rental income or loss from Form 4835 on page 2, line 39.

1 Show the kind and location of each rental real estate property:

A BACKYARD BUNGALOW STANFORD CALIFORNIA

B

C

2 For each rental real estate property listed on line 1, did you or your family use it during the tax year for personal purposes for more than the greater of:
- 14 days, or
- 10% of the total days rented at fair rental value?
(See page E-1.)

	Yes	No
A		X
B		
C		

Income:		Properties A	B	C	Totals (Add columns A, B, & C.)
3 Rents received	3	8,400			8,400
4 Royalties received	4				
Expenses:					
5 Advertising	5				
6 Auto and travel (see page E-2)	6				
7 Cleaning and maintenance	7				
8 Commissions	8				
9 Insurance	9				
10 Legal and other professional fees	10				
11 Management fees	11				
12 Mortgage interest paid to banks, etc. (see page E-2)	12				
13 Other interest	13				
14 Repairs	14	2,508			
15 Supplies	15				
16 Taxes	16				
17 Utilities	17	500			
18 PLUMBING AND ELECTRICAL	18	1,276			
POOL MAINTENANCE		280			
19 Add lines 5 through 18	19	4,564			4,564
20 Depreciation expense or depletion (see page E-2)	20				
21 Total expenses. Add lines 19 and 20	21	4,564			
22 Income/(loss) from rental real estate or royalty properties. Subtract line 21 from 3 (rents) or 4 (royalties). If result is (loss), see page E-3 to find out if you must file Form 6198	22	3,836			
23 Deductible rental real estate loss. Caution: Your rental real estate loss on line 22 may be limited. See page E-3 to find out if you must file Form 8582. Real estate professionals must complete line 42 on page 2	23	( )	( )	( )	
24 Income. Add positive amounts shown on line 22. Do not include any losses	24				3,836
25 Losses. Add royalty losses from line 22 and rental real estate losses from line 23. Enter the total losses here	25				( )
26 Total rental real estate and royalty income or (loss). Combine lines 24 and 25. Enter the result here. If Parts II, III, IV, and line 39 on page 2 do not apply to you, also enter this amount on Form 1040, line 17. Otherwise, include this amount in the total on line 40 on page 2	26				3,836

KFA For Paperwork Reduction Act Notice, see Form 1040 Instructions.

Schedule E (Form 1040) 1997

Schedule E (Form 1040) 1997 — Attachment Sequence No. 13 — Page 2

Name(s) shown on return: THOMAS J. AND SUSANNE M. CAMPBELL — Your social security number: 347-38-4500

Note: If you report amounts from farming or fishing on Schedule E, you must enter your gross income from those activities on line 41 below. Real estate professionals must complete line 42 below.

Part II Income or Loss From Partnerships and S Corporations

If you report a loss from an at-risk activity, you MUST check either column (e) or (f) on line 27 to describe your investment in the activity. See page E-4. If you check column (f), you must attach Form 6198.

27	(a) Name	(b) Enter P for partnership, S for S corp	(c) Check if foreign partnership	(d) Employer identification number	Invest. At Risk? (e) All is at risk	(f) Some is not at risk
A	SEE STATEMENT 6					
B						
C						
D						
E						

	Passive Income and Loss		Nonpassive Income and Loss		
	(g) Passive loss allowed (attach Form 8582 if required)	(h) Passive income from Schedule K-1	(i) Nonpassive loss from Schedule K-1	(j) Section 179 expense deduction from Form 4562	(k) Nonpassive income from Schedule K-1
A					STATEMENT 6
B					
C					
D					
E					
28a Totals					
b Totals			32		
29 Add columns (h) and (k) of line 28a					29
30 Add columns (g), (i), and (j) of line 28b					30 (32)
31 Total partnership and S corporation income or (loss). Combine lines 29 and 30. Enter the result here and include in the total on line 40 below					31 -32

Part III Income or Loss From Estates and Trusts

32	(a) Name	(b) Employer ID number
A		
B		
C		
D		

	Passive Income and Loss		Nonpassive Income and Loss	
	(c) Passive deduction or loss allowed (attach Form 8582 if required)	(d) Passive income from Schedule K-1	(e) Deduction or loss from Schedule K-1	(f) Other income from Schedule K-1
A				
B				
C				
D				
33a Totals				
b Totals				
34 Add columns (d) and (f) of line 33a				34
35 Add columns (c) and (e) of line 33b				35 ( )
36 Total estate and trust income or (loss). Combine lines 34 and 35. Enter the result here and include in the total on line 40 below				36

Part IV Income or Loss From Real Estate Mortgage Investment Conduits (REMICs) – Residual Holder

37	(a) Name	(b) Employer identification number	(c) Excess inclusion from Schedules Q, line 2c (see page E-5)	(d) Taxable income (net loss) from Schedules Q, line 1b	(e) Income from Schedules Q, line 3b
38 Combine columns (d) and (e) only. Enter the result here and include in the total on line 40 below					38

Part V Summary

39	Net farm rental income or (loss) from **Form 4835**. Also, complete line 41 below		39
40	TOTAL income or (loss). Combine lines 26, 31, 36, 38, and 39. Enter the result here and on Form 1040, line 17 ▶		40 3,804
41	**Reconciliation of Farming and Fishing Income:** Enter your **gross** farming and fishing income reported on Form 4835, line 7; Schedule K-1 (Form 1065), line 15b; Schedule K-1 (Form 1120S), line 23; and Schedule K-1 (Form 1041), line 14 (see page E-5)	41	
42	**Reconciliation for Real Estate Professionals.** If you were real estate professional (see pg. E-4), enter net income or (loss) you reported anywhere on Form 1040 from all rental real estate activities in which you materially participated under passive activity loss rules.	42	

Form **1116**
Department of the Treasury
Internal Revenue Service

Foreign Tax Credit

(Individual, Estate, Trust, or Nonresident Alien Individual)
▶ Attach to Form 1040, 1040NR, 1041, or 990-T.
▶ See separate instructions.

OMB No. 1545-0121
1997
Attachment Sequence No. 19

Name: THOMAS J. AND SUSANNE M. CAMPBELL

Identifying number as shown on page 1 of your tax return: 347-38-4500

Use a separate Form 1116 for each category of income listed below. See **Categories of Income** on page 3 of the instructions. Check only one box on each Form 1116. Report all amounts in U.S. dollars except where specified in Part II below. Complete this form for credit for taxes on:

a ☐ Passive income
b ☐ High withholding tax interest
c ☐ Financial services income
d ☐ Shipping income
e ☐ Dividends from a DISC or former DISC
f ☐ Certain distributions from a foreign sales corporation (FSC) or former FSC
g ☐ Lump-sum distributions (see page 3 of the instructions before completing form)
h ☒ General limitation income – all other income from sources outside the United States (including income from sources within U.S. possessions)

I Resident of (name of country) ▶ USA

Note: If you paid taxes to only one foreign country or U.S. possession, use column A in Part I and line A in Part II. If you paid taxes to **more than one** foreign country or U.S. possession, use a separate column and line for each country or possession. However, see the exception under **How To Complete Form 1116** on page 1 of the instructions.

Part I Figuring Taxable Income or Loss From Sources Outside the United States for Category Checked Above

	Foreign Country or U.S. Possession A	B	C		Total (Add cols. A, B, and C)
I Enter the name of the foreign country or US possession. ▶	VARIOUS				
1 Gross income from sources within country shown above and of the type checked above. See page 5 of the instructions: DIVIDENDS 484	484			1	484
Deductions and losses (Caution: See pages 6 and 7 of the instructions.):					
2 Expenses **definitely related** to the income on line 1 (attach statement)					
3 Pro rata share of other deductions **not definitely related:**					
a Certain itemized deductions or standard deduction. See instructions	5,975				
b Other deductions (attach statement)					
c Add lines 3a and 3b	5,975				
d Gross foreign source income. See instructions	484				
e Gross income from all sources. See instructions	203,335				
f Divide line 3d by line 3e. Do not enter more than "1"	0.0024				
g Multiply line 3c by line 3f	14				
4 Pro rata share of interest expense. See instructions:					
a Home mortgage interest. (Use worksheet on page 7 of the instructions)	53				
b Other interest expense					
5 Losses from foreign sources					
6 Add lines 2, 3g, 4a, 4b, and 5	67			6	67
7 Subtract line 6 from line 1. Enter the result here and on line 14, page 2 ▶				7	417

Part II Foreign Taxes Paid or Accrued (See page 7 of the instructions.)

COUNTRY	Credit is claimed for taxes (you must check one) (k) ☒ Paid (l) ☐ Accrued	Foreign taxes paid or accrued: In foreign currency — Taxes withheld at source on: (m) Date paid or accrued	(n) Dividends	(o) Rents and royalties	(p) Interest	(q) Other foreign taxes paid or accrued	In U.S. dollars — Taxes withheld at source on: (r) Dividends	(s) Rents and royalties	(t) Interest	(u) Other foreign taxes paid or accrued	(v) Total foreign taxes paid or accrued (add cols. (r) through (u))
A							124				124
B											
C											
8 Add lines A through C, column (v). Enter the total here and on line 9 ▶										8	124

KFA **For Paperwork Reduction Act Notice, see separate instructions.**

Form **1116** (1997)

Form 1116 (1997) THOMAS J. AND SUSANNE M. CAMPBELL 347-38-4500 Page 2

Part III Figuring the Credit

9	Enter amount from line 8. These are your total foreign taxes paid or accrued for the category of income checked above Part I	9	124		
10	Carryback or carryover (attach detailed computation)	10			
11	Add lines 9 and 10	11	124		
12	Reduction in foreign taxes. See page 7 of the instructions	12			
13	Subtract line 12 from line 11. This is the total amount of foreign taxes available for credit			13	124
14	Enter amount from line 7. This is your taxable income or (loss) from sources outside the United States (before adjustments) for the category of income checked above Part I. See page 8 of the instructions	14	417		
15	Adjustments to line 14. See page 8 of the instructions	15			
16	Combine the amounts on lines 14 and 15. This is your net foreign source taxable income. (If the result is zero or less, you have no foreign tax credit for the category of income you checked above Part I. Skip lines 17 through 21.)	16	417		
17	**Individuals:** Enter amount from Form 1040, line 36. If you are a nonresident alien, enter amount from Form 1040NR, line 35. **Estates and trusts:** Enter your taxable income without the deduction for your exemption . SEE . STMT . 7	17	147,925		
	Caution: If you figured your tax using the special rates on capital gains, see page 9 of the instructions.				
18	Divide line 16 by line 17. If line 16 is more than line 17, enter the figure "1"			18	0.0028
19	**Individuals:** Enter amount from Form 1040, line 39, **less** any amounts on Form 1040, lines 40, 41, 42, and any mortgage interest credit (from Form 8396) and District of Columbia first-time homebuyer credit (from Form 8859) on line 44. If you are a nonresident alien, enter amount from Form 1040NR, line 38, less any amount on Form 1040NR lines 39, 40, and any mortgage interest credit (from Form 8396) and District of Columbia first-time homebuyer credit (from Form 8859) on line 42.				
	Estates and trusts: Enter amount from Form 1041, Schedule G, line 1c, or Form 990-T, lines 36 and 37			19	37,127
20	Multiply line 19 by line 18 (maximum amount of credit)			20	104
21	Enter the amount from line 13 or line 20, whichever is **smaller**. If this is the only Form 1116 you are completing, skip lines 22 through 29 and enter this amount on line 30. Otherwise, complete the appropriate line in Part IV. See page 9 of the instructions ▶			21	104

Part IV Summary of Credits From Separate Parts III (See page 9 of the instructions.)

22	Credit for taxes on passive income	22			
23	Credit for taxes on high withholding tax interest	23			
24	Credit for taxes on financial services income	24			
25	Credit for taxes on shipping income	25			
26	Credit for taxes on dividends from a DISC or former DISC	26			
27	Credit for taxes on certain distributions from a FSC or former FSC	27			
28	Credit for taxes on lump-sum distributions	28			
29	Credit for taxes on general limitation income (all other income from sources outside the United States)	29			
30	Add lines 22 through 29			30	104
31	Reduction of credit for international boycott operations. See instructions for line 12 on page 8			31	
32	Subtract line 31 from line 30. This is your foreign tax credit. Enter here and on Form 1040, line 43; Form 1040NR, line 41; Form 1041, Schedule G, line 2a; or Form 990-T, line 39a ▶			32	104

ALTERNATIVE MINIMUM TAX

Foreign Tax Credit

Form **1116**

Department of the Treasury
Internal Revenue Service

(Individual, Estate, Trust, or Nonresident Alien Individual)
▶ Attach to Form 1040, 1040NR, 1041, or 990–T.
▶ See separate instructions.

OMB No. 1545-0121

1997

Attachment Sequence No. 19

Name: THOMAS J. AND SUSANNE M. CAMPBELL

Identifying number as shown on page 1 of your tax return: 347-38-4500

Use a separate Form 1116 for each category of income listed below. See **Categories of Income** on page 3 of the instructions. Check only one box on each Form 1116. Report all amounts in U.S. dollars except where specified in Part II below. Complete this form for credit for taxes on:

a ☐ Passive income
b ☐ High withholding tax interest
c ☐ Financial services income
d ☐ Shipping income
e ☐ Dividends from a DISC or former DISC
f ☐ Certain distributions from a foreign sales corporation (FSC) or former FSC
g ☐ Lump–sum distributions (see page 3 of the instructions before completing form)
h ☒ General limitation income – all other income from sources outside the United States (including income from sources within U.S. possessions)

I Resident of (name of country) ▶ USA

Note: If you paid taxes to only one foreign country or U.S. possession, use column A in Part I and line A in Part II. If you paid taxes to more than one foreign country or U.S. possession, use a separate column and line for each country or possession. However, see the exception under **How To Complete Form 1116** on page 1 of the instructions.

Part I Figuring Taxable Income or Loss From Sources Outside the United States for Category Checked Above

	Foreign Country or U.S. Possession A	B	C		Total (Add cols. A, B, and C.)
J Enter the name of the foreign country or US possession. ▶	VARIOUS				
1 Gross income from sources within country shown above and of the type checked above. See page 5 of the instructions: DIVIDENDS 484	484			1	484
Deductions and losses (Caution: See pages 6 and 7 of the instructions.):					
2 Expenses **definitely related** to the income on line 1 (attach statement)					
3 Pro rata share of other deductions **not definitely related:**					
a Certain itemized deductions or standard deduction. See instructions	1,950				
b Other deductions (attach statement)					
c Add lines 3a and 3b	1,950				
d Gross foreign source income. See instructions	484				
e Gross income from all sources. See instructions	203,335				
f Divide line 3d by line 3e. Do not enter more than "1"	0.0024				
g Multiply line 3c by line 3f	5				
4 Pro rata share of interest expense. See instructions:					
a Home mortgage interest. (Use worksheet on page 7 of the instructions)	51				
b Other interest expense					
5 Losses from foreign sources					
6 Add lines 2, 3g, 4a, 4b, and 5	56			6	56
7 Subtract line 6 from line 1. Enter the result here and on line 14, page 2 ▶				7	428

Part II Foreign Taxes Paid or Accrued (See page 7 of the instructions.)

COUNTRY	Credit is claimed for taxes (you must check one) (c) ☒ Paid (f) ☐ Accrued	Foreign taxes paid or accrued: In foreign currency — Taxes withheld at source on: (g) Dividends	(h) Rents and royalties	(i) Interest	(q) Other foreign taxes paid or accrued	In U.S. dollars — Taxes withheld at source on: (r) Dividends	(s) Rents and royalties	(t) Interest	(u) Other foreign taxes paid or accrued	(v) Total foreign taxes paid or accrued (add cols. (r) through (u))
	(m) Date paid or accrued									
A						124				124
B										
C										
8 Add lines A through C, column (v). Enter the total here and on line 9 ▶									8	124

ALTERNATIVE MINIMUM TAX

Form 1116 (1997) THOMAS J. AND SUSANNE M. CAMPBELL 347-38-4500 Page 2

Part III Figuring the Credit

9	Enter amount from line 8. These are your total foreign taxes paid or accrued for the category of income checked above Part I	9	124		
10	Carryback or carryover (attach detailed computation)	10			
11	Add lines 9 and 10	11	124		
12	Reduction in foreign taxes. See page 7 of the instructions	12			
13	Subtract line 12 from line 11. This is the total amount of foreign taxes available for credit			13	124
14	Enter amount from line 7. This is your taxable income or (loss) from sources outside the United States (before adjustments) for the category of income checked above Part I. See page 8 of the instructions	14	428		
15	Adjustments to line 14. See page 8 of the instructions	15			
16	Combine the amounts on lines 14 and 15. This is your net foreign source taxable income. (If the result is zero or less, you have no foreign tax credit for the category of income you checked above Part I. Skip lines 17 through 21.)	16	428		
17	**Individuals:** Enter amount from Form 1040, line 36. If you are a nonresident alien, enter amount from Form 1040NR, line 35. **Estates and trusts:** Enter your taxable income without the deduction for your exemption	17	171,322		
	Caution: If you figured your tax using the special rates on capital gains, see page 9 of the instructions.				
18	Divide line 16 by line 17. If line 16 is more than line 17, enter the figure "1"			18	0.0025
19	**Individuals:** Enter amount from Form 1040, line 39, **less** any amounts on Form 1040, lines 40, 41, 42, and any mortgage interest credit (from Form 8396) and District of Columbia first-time homebuyer credit (from Form 8859) on line 44. If you are a nonresident alien, enter amount from Form 1040NR, line 38, less any amount on Form 1040NR lines 39, 40, and any mortgage interest credit (from Form 8396) and District of Columbia first-time homebuyer credit (from Form 8859) on line 42.				
	Estates and trusts: Enter amount from Form 1041, Schedule G, line 1c, or Form 990-T, lines 36 and 37			19	33,930
20	Multiply line 19 by line 18 (maximum amount of credit)			20	85
21	Enter the amount from line 13 or line 20, whichever is **smaller**. If this is the only Form 1116 you are completing, skip lines 22 through 29 and enter this amount on line 30. Otherwise, complete the appropriate line in Part IV. See page 9 of the instructions ▶			21	85

Part IV Summary of Credits From Separate Parts III (See page 9 of the instructions.)

22	Credit for taxes on passive income	22			
23	Credit for taxes on high withholding tax interest	23			
24	Credit for taxes on financial services income	24			
25	Credit for taxes on shipping income	25			
26	Credit for taxes on dividends from a DISC or former DISC	26			
27	Credit for taxes on certain distributions from a FSC or former FSC	27			
28	Credit for taxes on lump-sum distributions	28			
29	Credit for taxes on general limitation income (all other income from sources outside the United States)	29			
30	Add lines 22 through 29			30	85
31	Reduction of credit for international boycott operations. See instructions for line 12 on page 8.			31	
32	Subtract line 31 from line 30. This is your foreign tax credit. Enter here and on Form 1040, line 43; Form 1040NR, line 41; Form 1041, Schedule G, line 2a; or Form 990-T, line 39a ▶			32	85

Form **6251**

Department of the Treasury
Internal Revenue Service

Alternative Minimum Tax – Individuals

▶ See separate instructions.
▶ Attach to Form 1040 or Form 1040NR.

OMB No. 1545-0227

1997

Attachment Sequence No 32

Name(s) shown on Form 1040

THOMAS J. AND SUSANNE M. CAMPBELL

Your social security number

347-38-4500

Part I Adjustments and Preferences

1	If you itemized deductions on Schedule A (Form 1040), go to line 2. Otherwise, enter your standard deduction from Form 1040, line 35, here and go to line 6	1	
2	Medical and dental. Enter the smaller of Schedule A (Form 1040), line 4 or 2 1/2% of Form 1040, line 33	2	
3	Taxes. Enter the amount from Schedule A (Form 1040), line 9	3	15,799
4	Certain interest on a home mortgage not used to buy, build, or improve your home	4	1,980
5	Miscellaneous itemized deductions. Enter the amount from Schedule A (Form 1040), line 26	5	1,293
6	Refund of taxes. Enter any tax refund from Form 1040, line 10 or line 21	6	( )
7	Investment interest. Enter difference between regular tax and AMT deduction	7	
8	Post–1986 depreciation. Enter difference between regular tax and AMT depreciation	8	
9	Adjusted gain or loss. Enter difference between AMT and regular tax gain or loss	9	
10	Incentive stock options. Enter excess of AMT income over regular tax income	10	
11	Passive activities. Enter difference between AMT and regular tax income or loss	11	
12	Beneficiaries of estates and trusts. Enter the amount from Schedule K–1 (Form 1041), line 9	12	
13	Tax–exempt interest from private activity bonds issued after 8/7/86	13	
14	Other. Enter the amount, if any, for each item and enter the total on line 14.		
	a Charitable contributions	h Loss limitations	
	b Circulation expenditures	i Mining costs	
	c Depletion	j Patron's adjustment	
	d Depreciation (pre–1987)	k Pollution control facilities	
	e Installment sales	l Research & experimental	
	f Intangible drilling costs	m Tax shelter farm activities	
	g Long–term contracts	n Related adjustments	14
15	**Total Adjustments and Preferences.** Combine lines 1 through 14 ▶	15	19,072

Part II Alternative Minimum Taxable Income

16	Enter the amount from **Form 1040, line 36.** If less than zero, enter as a (loss) ▶	16	154,459
17	Net operating loss deduction, if any, from Form 1040, line 21. Enter as a positive amount	17	
18	If Form 1040, line 33, is over $121,200 (over $60,600 if married filing separately), and you itemized deductions, enter the amount, if any, from line 9 of the worksheet for Schedule A (Form 1040), line 28	18	(2,209)
19	Combine lines 15 through 18 ▶	19	171,322
20	Alternative tax net operating loss deduction. See page 5 of the instructions	20	
21	**Alternative Minimum Taxable Income.** Subtract line 20 from line 19. (If married filing separately and line 21 is more than $165,000, see page 5 of the instructions.) ▶	21	171,322

Part III Exemption Amount and Alternative Minimum Tax

22 **Exemption Amount.** (If this form is for a child under age 14, see page 6 of the instructions.)

If your filing status is:	And line 21 is not over...	THEN enter on line 22...
Single or head of household	$112,500	$33,750
Married filing jointly or qualifying widow(er)	150,000	45,000
Married filing separately	75,000	22,500

If line 21 is **over** the amount shown above for your filing status, see page 6 of the instructions.

22		22	39,669
23	Subtract line 22 from line 21. If zero or less, enter –0– here and on lines 26 and 28 ▶	23	131,653
24	If you completed Schedule D (Form 1040), and had an amount on line 25 or line 27 (as refigured for the AMT, if necessary), go to Part IV of Form 6251 to figure line 24. **All others:** If line 23 is $175,000 or less ($87,500 or less if married filing separately), multiply line 23 by 26% (.26). Otherwise, multiply line 23 by 28% (.28) and subtract $3,500 ($1,750 if married filing separately) from the result	24	33,930
25	Alternative minimum tax foreign tax credit. See page 7 of the instructions	25	85
26	Tentative minimum tax. Subtract line 25 from line 24 ▶	26	33,845
27	Enter your tax from Form 1040, line 39 (minus any tax from Form 4972 and any foreign tax credit from Form 1040, line 43	27	37,023
28	**Alternative Minimum Tax.** (If this form is for a child under age 14, see page 8 of the instructions.) Subtract line 27 from line 26. If zero or less, enter –0–. Enter here and on Form 1040, line 48 ▶	28	0

KFA For **Paperwork Reduction Act Notice, see separate instructions.**

Form 6251 (1997)

Form 8251 (1997) THOMAS J. AND SUSANNE M. CAMPBELL 347-38-4500 Page 2

Part IV Line 24 Computation Using Maximum Capital Gains Rates

29	Enter the amount from line 23			29	131,653
30	Enter the amount from Schedule D (Form 1040), line 27 (as refigured for the AMT, if necessary)	30	4,998		
31	Enter the amount from Schedule D (Form 1040), line 25 (as refigured for the AMT, if necessary)	31			
32	Add lines 30 and 31	32	4,998		
33	Enter the amount from Schedule D (Form 1040), line 22 (as refigured for the AMT, if necessary)	33	18,859		
34	Enter the smaller of line 32 or line 33			34	4,998
35	Subtract line 34 from line 29. If zero or less, enter -0-			35	126,655
36	If line 35 is $175,000 or less ($87,500 or less if married filing separately), multiply line 35 by 26% (.26). Otherwise, multiply line 35 by 28% (.28) and subtract $3,500 ($1,750 if married filing separately) from the result ▶			36	32,930
37	Enter the amount from Schedule D (Form 1040), line 36 (as figured for the regular tax)			37	
38	Enter the smallest of line 29, line 30, or line 37			38	
39	Multiply line 38 by 10% (.10) ▶			39	
40	Enter the smaller of line 29 or line 30			40	4,998
41	Enter the amount from line 38			41	
42	Subtract line 41 from line 40. If zero or less, enter -0-			42	4,998
43	Multiply line 42 by 20% (.20) ▶			43	1,000
44	Enter the amount from line 29			44	131,653
45	Add lines 35, 38, and 42			45	131,653
46	Subtract line 45 from line 44			46	
47	Multiply line 46 by 25% (.25) ▶			47	
48	Add lines 36, 39, 43, and 47			48	33,930
49	If line 29 is $175,000 or less ($87,500 or less if married filing separately), multiply line 29 by 26% (.26). Otherwise, multiply line 29 by 28% (.28) and subtract $3,500 ($1,750 if married filing separately) from the result			49	34,230
50	Enter the smaller of line 48 or line 49 here and on line 24 ▶			50	33,930

Form **4562**

Department of the Treasury
Internal Revenue Service (99)

Depreciation and Amortization
(Including Information on Listed Property)

▶ See separate instructions. ▶ Attach this form to your return.

OMB No. 1545-0172

1997

Attachment Sequence No. **67**

Name(s) shown on return

THOMAS J. AND SUSANNE M. CAMPBELL

Identifying number

347-38-4500

Business or activity to which this form relates

SCHEDULE A (2%)

Part I **Election To Expense Certain Tangible Property (Section 179)** (Note: If you have any "listed property," complete Part V before you complete Part I.)

1	Maximum dollar limitation. If an enterprise zone business, see page 2 of the instructions	1	$18,000
2	Total cost of section 179 property placed in service. See page 2 of the instructions	2	
3	Threshold cost of section 179 property before reduction in limitation	3	$200,000
4	Reduction in limitation. Subtract line 3 from line 2. If zero or less, enter -0-	4	
5	Dollar limitation for tax year. Subtract line 4 from line 1. If zero or less, enter -0-. If married filing separately, see page 2 of the instructions	5	

6	(a) Description of property	(b) Cost (business use only)	(c) Elected cost

7	Listed property. Enter amount from line 27	7	
8	Total elected cost of section 179 property. Add amounts in column (c), lines 6 and 7	8	
9	Tentative deduction. Enter the smaller of line 5 or line 8	9	
10	Carryover of disallowed deduction from 1996. See page 3 of the instructions	10	
11	Business income limitation. Enter the smaller of business income (not less than zero) or line 5 (see instructions)	11	
12	Section 179 expense deduction. Add lines 9 and 10, but do not enter more than line 11	12	
13	Carryover of disallowed deduction to 1998. Add lines 9 and 10, less line 12 ▶	13	

Note: Do not use Part II or Part III below for listed property (automobiles, certain other vehicles, cellular telephones, certain computers, or property used for entertainment, recreation, or amusement). Instead, use Part V for listed property.

Part II **MACRS Depreciation For Assets Placed In Service ONLY During Your 1997 Tax Year** (Do Not Include Listed Property.)

Section A – General Asset Account Election

14 If you are making the election under section 168(i)(4) to group any assets placed in service during the tax year into one or more general asset accounts, check this box. See page 3 of the instructions ▶ ☐

Section B – General Depreciation System (GDS) (See page 3 of the instructions.)

(a) Classification of property	(b) Month and year placed in service	(c) Basis for depreciation (business/investment use only – see instructions)	(d) Recovery period	(e) Convention	(f) Method	(g) Depreciation deduction
15a 3-year property						
b 5-year property						
c 7-year property						
d 10-year property						
e 15-year property						
f 20-year property						
g 25-year property			25 yrs		S/L	
h Residential rental property			27.5 yrs	MM	S/L	
			27.5 yrs	MM	S/L	
i Nonresidential real property			39 yrs	MM	S/L	
				MM	S/L	

Section C – Alternative Depreciation System (ADS): (See page 6 of the instructions.)

16a Class life					S/L	
b 12-year			12 yrs		S/L	
c 40-year			40 yrs	MM	S/L	

Part III **Other Depreciation** (Do Not Include Listed Property.) (See page 6 of the instructions.)

17	GDS and ADS deductions for assets placed in service in tax years beginning before 1997	17	
18	Property subject to section 168(f)(1) election	18	
19	ACRS and other depreciation	19	

Part IV **Summary** (See page 7 of the instructions.)

20	Listed property. Enter amount from line 26	20	
21	**Total.** Add deductions on line 12, lines 15 and 16 in column (g), and lines 17 through 20. Enter here and on the appropriate lines of your return. Partnerships & S corporations – see instructions	21	
22	For assets shown above and placed in service during the current year, enter the portion of the basis attributable to section 263A costs	22	

Form **4562**

Department of the Treasury
Internal Revenue Service (99)

Depreciation and Amortization
(Including Information on Listed Property)

▶ See separate instructions. ▶ Attach this form to your return.

OMB No. 1545-0172

1997

Attachment Sequence No. **67**

Name(s) shown on return

THOMAS J. AND SUSANNE M. CAMPBELL

Identifying number

347-38-4500

Business or activity to which this form relates

SCHEDULE A (EMPLOYEE EXP.)

Part I Election To Expense Certain Tangible Property (Section 179) (Note: If you have any "listed property," complete Part V before you complete Part I.)

1	Maximum dollar limitation. If an enterprise zone business, see page 2 of the instructions	1	$18,000
2	Total cost of section 179 property placed in service. See page 2 of the instructions	2	
3	Threshold cost of section 179 property before reduction in limitation	3	$200,000
4	Reduction in limitation. Subtract line 3 from line 2. If zero or less, enter -0-	4	
5	Dollar limitation for tax year. Subtract line 4 from line 1. If zero or less, enter -0-. If married filing separately, see page 2 of the instructions	5	

6	(a) Description of property	(b) Cost (business use only)	(c) Elected cost

7	Listed property. Enter amount from line 27	7	
8	Total elected cost of section 179 property. Add amounts in column (c), lines 6 and 7	8	
9	Tentative deduction. Enter the smaller of line 5 or line 8	9	
10	Carryover of disallowed deduction from 1996. See page 3 of the instructions	10	
11	Business income limitation. Enter the smaller of business income (not less than zero) or line 5 (see instructions)	11	
12	Section 179 expense deduction. Add lines 9 and 10, but do not enter more than line 11	12	
13	Carryover of disallowed deduction to 1998. Add lines 9 and 10, less line 12 ▶	13	

Note: Do not use Part II or Part III below for listed property (automobiles, certain other vehicles, cellular telephones, certain computers, or property used for entertainment, recreation, or amusement). Instead, use Part V for listed property.

Part II MACRS Depreciation For Assets Placed in Service ONLY During Your 1997 Tax Year (Do Not Include Listed Property.)

Section A – General Asset Account Election

14 If you are making the election under section 168(i)(4) to group any assets placed in service during the tax year into one or more general asset accounts, check this box. See page 3 of the instructions ▶ ☐

Section B – General Depreciation System (GDS) (See page 3 of the instructions.)

(a) Classification of property	(b) Month and year placed in service	(c) Basis for depreciation (business/investment use only – see instructions)	(d) Recovery period	(e) Convention	(f) Method	(g) Depreciation deduction
15a 3-year property						
b 5-year property						
c 7-year property						
d 10-year property						
e 15-year property						
f 20-year property						
g 25-year property			25 yrs		S/L	
h Residential rental property			27.5 yrs	MM	S/L	
			27.5 yrs	MM	S/L	
i Nonresidential real property			39 yrs	MM	S/L	
				MM	S/L	

Section C – Alternative Depreciation System (ADS): (See page 6 of the instructions.)

16a Class life					S/L	
b 12-year			12 yrs		S/L	
c 40-year			40 yrs	MM	S/L	

Part III Other Depreciation (Do Not Include Listed Property.) (See page 6 of the instructions.)

17	GDS and ADS deductions for assets placed in service in tax years beginning before 1997	17	444
18	Property subject to section 168(f)(1) election	18	
19	ACRS and other depreciation	19	

Part IV Summary (See page 7 of the instructions.)

20	Listed property. Enter amount from line 26	20	
21	**Total.** Add deductions on line 12, lines 15 and 16 in column (g), and lines 17 through 20. Enter here and on the appropriate lines of your return. Partnerships & S corporations – see instructions	21	444
22	For assets shown above and placed in service during the current year, enter the portion of the basis attributable to section 263A costs	22	

Form **4952** — Department of the Treasury, Internal Revenue Service (99)

Investment Interest Expense Deduction

▶ Attach to your tax return.

OMB No. 1545-0191

1997

Attachment Sequence No. 72

Name(s) shown on return: THOMAS J. AND SUSANNE M. CAMPBELL

Identifying number: 347-38-4500

Part I Total Investment Interest Expense

1 Investment interest expense paid or accrued in 1997. See instructions	1	18
2 Disallowed investment interest expense from 1996 Form 4952, line 7	2	
3 **Total investment interest expense.** Add lines 1 and 2	3	18

Part II Net Investment Income

4a Gross income from property held for investment (excluding any net gain from the disposition of property held for investment)			4a	10,423
b Net gain from the disposition of property held for investment	4b	18,859		
c Net capital gain from the disposition of property held for investment	4c	18,859		
d Subtract line 4c from line 4b. If zero or less, enter -0-			4d	0
e Enter all or part of the amount on line 4c that you elect to include in investment income. Do not enter more than the amount on line 4b. See instructions ▶			4e	
f Investment income. Add lines 4a, 4d, and 4e. See instructions			4f	10,423
5 Investment expenses. See instructions			5	236
6 **Net investment income.** Subtract line 5 from line 4f. If zero or less, enter -0-			6	10,187

Part III Investment Interest Expense Deduction

7 Disallowed investment interest expense to be carried forward to 1998. Subtract line 6 from line 3. If zero or less, enter -0-	7	0
8 **Investment interest expense deduction.** Enter the smaller of line 3 or 6. See instructions	8	18

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1997

FORM A
For use by Members, officers and employees

99 MAY 15 AM 9:09

Charles T. Canady
(Full Name)

2432 Rayburn HOB, Washington, DC 20515 (202) 225-1252
(Mailing Address) Daytime Telephone

HR (Office Use Only) 4

Filer Status	[X] Member of the U.S. House of Representatives	State Florida District 12	[ ] Officer or Employee	Employing Office	**A *$200 penalty* shall be assessed against anyone who files more than 30 days late.**
Report Type	[X] Annual (May 15)	[ ] Amendment	[ ] Termination	Termination Date	

PRELIMINARY INFORMATION — ANSWER EACH OF THESE QUESTIONS

I Did you or your spouse have "earned" income (e.g., salaries or fees) of $200 or more from any source in the reporting period? **If yes, complete and attach Schedule I.**	Yes [ ]	No [X]	VI Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $250 and not otherwise exempt)? **If yes, complete and attach Schedule VI.**	Yes [ ]	No [X]
II Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? **If yes, complete and attach Schedule II.**	Yes [ ]	No [X]	VII Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $250 from one source)? **If yes, complete and attach Schedule VII.**	Yes [X]	No [ ]
III Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? **If yes, complete and attach Schedule III.**	Yes [X]	No [ ]	VIII Did you hold any reportable positions on or before the date of filing in the current calendar year? **If yes, complete and attach Schedule VIII.**	Yes [X]	No [ ]
IV Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset worth more than $1,000 in the reporting period? **If yes, complete and attach Schedule IV.**	Yes [ ]	No [X]	IX Did you have any reportable agreement or arrangement with an outside entity? **If yes, complete and attach Schedule IX.**	Yes [ ]	No [X]
V Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? **If yes, complete and attach Schedule V.**	Yes [ ]	No [X]	**Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.**		

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION — ANSWER EACH OF THESE QUESTIONS

TRUSTS—Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child?	Yes [X]	No [ ]
EXEMPTION—Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption?	Yes [ ]	No [X]

CERTIFICATION — THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended. The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct or its designee. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil penalties and criminal sanctions (*See* 5 U.S.C. app. 4, §104 and 18 U.S.C. §1001)

SIGNATURE OF REPORTING INDIVIDUAL: Chas. T. Canady

DATE (Month/Day/Year): 5/14/98

SCHEDULE III — ASSETS AND "UNEARNED" INCOME

BLOCK A — Asset and/or Income Source

Identify (a) each asset held for investment or production of income with a fair market value exceeding $1,000 at the end of the reporting year, and (b) any other asset or source of income which generated more than $200 in "unearned" income during the year. For rental property or land, provide an address. Provide full names of any mutual funds. For an IRA or retirement plan that is *self-directed*, list the underlying assets worth more than $1,000. For an IRA or retirement plan that is not self-directed, name the institution holding the account.

Exclude: Your personal residence(s) (unless there is rental income), any debt owed to you by your spouse, or by your or your spouse's child, parent, or sibling, any deposits totalling $5,000 or less in personal savings accounts, any financial interests in or income derived from U.S. Government retirement programs.

If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC) or is jointly held (JT), in the optional column on the far left.

BLOCK B — Value of Asset

at close of reporting year.
If you use a valuation method other than fair market value, please specify the method used. If an asset was sold and is included only because it generated income, the value should be "None."

BLOCK C — Type of Income

BLOCK D — Amount of Income

For IRA's and retirement plans that are *not* self-directed, you may write in "NA" for income.

BLOCK E — Transaction

Indicate if asset was purchased (P), sold (S), or exchanged (E) in reporting year.

	BLOCK A	B: None	A: $1 – $1,000	B: $1,001 – $15,000	C: $15,001 – $50,000	D: $50,001 – $100,000	E: $100,001 – $250,000	F: $250,001 – $500,000	G: $500,001 – $1,000,000	H: $1,000,001 – $5,000,000	I: $5,000,001 – $25,000,000	J: $25,000,001 – $50,000,000	K: Over $50,000,000	L: Indefinite	C: DIVIDENDS	D: RENT	E: INTEREST	F: CAPITAL GAINS	G: EXCEPTED TRUST	H: QUALIFIED BLIND TRUST	I: Other Type of Income (Specify. For Example: Partnership Income or Farm Income)	BLOCK D: I None	II $1 – $200	III $201 – $1,000	IV $1,001 – $2,500	V $2,501 – $5,000	VI $5,001 – $15,000	VII $15,001 – $50,000	VIII $50,001 – $100,000	IX $100,001 – $1,000,000	X $1,000,001 – $5,000,000	XI Over $5,000,000	BLOCK E
SP DC JT	*Examples*			Indefinite			X	X							X		X				Royalties				X		X					P
SP	Euro Pac Growth Fund SBI				X										X			X					X	X								
SP	Growth Fund of America				X										X			X					X	X								
SP	New Economy Fund				X										X			X					X	X								
SP	Putnam Fund for Growth and Income CLA				X										X			X						X								
SP	CCR Money Market Fund				X										X									X								

For additional assets and unearned income, use next page.

SCHEDULE VII —TRAVEL PAYMENTS AND REIMBURSEMENTS

Identify the source and list travel itinerary, dates, and nature of expenses provided for travel and travel-related expenses totalling more than $250 received by you, your spouse, or a dependent child during the reporting period. Indicate whether a family member accompanied the traveler at the sponsor's expense, and the amount of time, if any, that was not at the sponsor's expense. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor.

Exclude: Travel-related expenses provided by federal, state, and local governments, or by a foreign government required to be separately reported under the Foreign Gifts and Decorations Act (5 U.S.C. § 7342); travel paid for by a Federal political committee; travel provided to a spouse or dependent child that is totally independent of his or her relationship to you.

Source	Date(s)	Point of Departure—Destination—Point of Return	Lodging? (Y/N)	Food? (Y/N)	Was a Family Member Included? (Y/N)	Any time not at sponsor's expense
Examples: Chicago Chamber of Commerce	Mar. 2	Wash., D.C.—Chicago—Wash., D.C.	N	N	N	N
Roycroft Corporation	Aug. 6–13	Wash., D.C.—Los Angeles—Cleveland	Y	Y	Y	4 Days
Florida Chamber of Commerce	Feb 13-14	Orlando, FL	Y	Y	Y	N
Robert Thomas of Thonotosassa, FL	Feb 28-Mar. 1	Washington, DC-Leesburg, VA	Y	Y	Y	N
Care Net	Mar 8-9	Wash., D.C.-Dallas-DC.	Y	Y	N	N
The American Israel Education Foundation	Aug 25-Sept. 1	Washington, DC-Israel Israel-Orlando, FL	Y	Y	Y	N
Muskegon Pregnancy Services	Sept 13-14	Tampa, FL-Grand Rapids, MI-Tampa, FL	Y	Y	N	N
Care Net	Dec. 9	Washington, DC-Atlanta, GA	N	Y	N	N

This page may be copied if more space is required.

SCHEDULE VIII — POSITIONS

Report all positions, compensated or uncompensated, held during the current calendar year as an officer, director, trustee of an organization, partner, proprietor, representative, employee, or consultant of any corporation, firm, partnership, or other business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States.

Exclude: Positions held in any religious, social, fraternal, or political entities; positions solely of an honorary nature; and positions listed on Schedule I.

Position	Name of Organization
Director (unpaid)	Volunteers in Service to the Elderly, Inc.
Director (unpaid)	Care Net

SCHEDULE IX — AGREEMENTS

Identify the date, parties to, and general terms of any agreement or arrangement with respect to: future employment, a leave of absence during the period of government service; continuation or deferral of payments by a former or current employer other than the U.S. Government, or continuing participation in an employee welfare or benefit plan maintained by a former employer.

Date	Parties To	Terms of Agreement

GPO 1998 46-260 (mac)

Use additional sheets if more space is required.

RECEIVED
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CLERK OF THE HOUSE

UNITED STATES HOUSE OF REPRESENTATIVES
FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1997

FORM A
For use by Members, officers, and employees

CHRISTOPHER B. CANNON
(Full Name)

118 CANNON HOUSE OFFICE BUILDING
(Mailing Address)

WASHINGTON, D.C. 20515-4403

Daytime Telephone

HAND DELIVERED
(Office Use Only)

6

Filer Status	[X]	Member of the U.S. House of Representatives	State UTAH District 3	[ ] Officer or Employee	Employing Office
Report Type	[X]	Annual (May 15)	[ ] Amendment	[ ] Termination	Termination Date

A *$200 penalty* shall be assessed against anyone who files more than 30 days late.

PRELIMINARY INFORMATION — ANSWER EACH OF THESE QUESTIONS

I. Did you or your spouse have "earned" income (e.g., salaries or fees) of $200 or more from any source in the reporting period? **If yes, complete and attach Schedule I.**	Yes [ ]	No [X]	VI. Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $250 and not otherwise exempt)? **If yes, complete and attach Schedule VI.**	Yes [ ]	No [X]
II. Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? **If yes, complete and attach Schedule II.**	Yes [ ]	No [X]	VII. Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $250 from one source)? **If yes, complete and attach Schedule VII.**	Yes [ ]	No [X]
III. Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? **If yes, complete and attach Schedule III.**	Yes [X]	No [ ]	VIII. Did you hold any reportable positions on or before the date of filing in the current calendar year? **If yes, complete and attach Schedule VIII.**	Yes [ ]	No [X]
IV Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset worth more than $1,000 in the reporting period? **If yes, complete and attach Schedule IV.**	Yes [X]	No [ ]	IX. Did you have any reportable agreement or arrangement with an outside entity? **If yes, complete and attach Schedule IX.**	Yes [ ]	No [X]
V Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? **If yes, complete and attach Schedule V.**	Yes [X]	No [ ]	**Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.**		

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION — ANSWER EACH OF THESE QUESTIONS

TRUSTS—Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child?	Yes [ ]	No [X]
EXEMPTION—Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption?	Yes [ ]	No [X]

CERTIFICATION — THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended. The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct or its designee. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil penalties and criminal sanctions (*See* 5 U.S.C. app. 4, §104 and 18 U.S.C. §1001).

SIGNATURE OF REPORTING INDIVIDUAL

DATE (Month/Day/Year) 5/15/98

562

SCHEDULE III — ASSETS AND "UNEARNED" INCOME

Name CHRISTOPHER B. CANNON | Page 1 of 5

BLOCK A — Asset and/or Income Source

Identify (a) each asset held for investment or production of income with a fair market value exceeding $1,000 at the end of the reporting year, and (b) any other asset or source of income which generated more than $200 in "unearned" income during the year. For rental property or land, provide an address. Provide full names of any mutual funds. For an IRA or retirement plan that is *self-directed*, list the underlying assets worth more than $1,000. For an IRA or retirement plan that is not self-directed, name the institution holding the account.

Exclude: Your personal residence(s) (unless there is rental income), any debt owed to you by your spouse, or by your or your spouse's child, parent, or sibling, any deposits totalling $5,000 or less in personal savings accounts; any financial interests in or income derived from U.S. Government retirement programs.

If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC) or is jointly held (JT), in the optional column on the far left.

BLOCK B — Value of Asset

at close of reporting year. If you use a valuation method other than fair market value, please specify the method used. If an asset was sold and is included only because it generated income, the value should be "None."

BLOCK C — Type of Income

BLOCK D — Amount of Income

For IRA's and retirement plans that are *not* self-directed, you may write in "NA" for income.

BLOCK E — Transaction

Indicate if asset was purchased (P), sold (S), or exchanged (E) in reporting year.

	BLOCK A	BLOCK B												BLOCK C							BLOCK D										BLOCK E
		A None	B $1 – $1,000	C $1,001 – $15,000	$15,001 – $50,000	E $50,001 – $100,000	F $100,001 – $250,000	G $250,001 – $500,000	H $500,001 – $1,000,000	I $1,000,001 – $5,000,000	J $5,000,001 – $25,000,000	K $25,000,001 – $50,000,000	L Over $50,000,000	DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Type of Income (Specify. For Example: Partnership Income or Farm Income)	I None	II $1 – $200	III $201 – $1,000	IV $1,001 – $2,500	V $2,501 – $5,000	VI $5,001 – $15,000	VII $15,001 – $50,000	VIII $50,001 – $100,000	IX $100,001 – $1,000,000	X $1,000,001 – $5,000,000	XI Over $5,000,000	
SP DC JT	*Examples* SP Mega Corp. Stock Simon & Schuster 1st Bank of Paducah, KY accounts		Indefinite			X	X							X						Royalties											P S E P
JT	First Security Bank of Utah Checking Account SLC			X												X						X									
	Zions First National Bank Bank Account - Checking SLC						X									X							X								
	Zions First National Bank Money Market Account SLC		X													X						X									
	Smith Barney - CMA Account Salt Lake City, Utah			X										X									X								
	Chris Bacon Loan Receivable Provo, UT			X												X					X										
	Dennis Bacon Loan Receivable Mapleton, UT			X												X					X										

For additional assets and unearned income, use next page.

SCHEDULE III — ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Name CHRISTOPHER B. CANNON | Page 2 of 5

SP. DC. JT	BLOCK A Asset and/or Income Source	BLOCK B Year-End Value of Asset											BLOCK C Type of Income						BLOCK D Amount of Income										BLOCK E Transaction
		A None	B $1 - $1,000	C $1,001 - $15,000	D $15,001 - $50,000	E $50,001 - $100,000	F $100,001 - $250,000	G $250,001 - $500,000	H $500,001 - $1,000,000	I $1,000,001 - $5,000,000	J $5,000,001 - $25,000,000	K $25,000,001 - $50,000,000	L Over $50,000,000	DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Type of Income (Specify)	I None	II $200	III $201 - $1,000	IV $1,001 - $2,500	V $2,501 - $5,000	VI $5,001 - $15,000	VII $15,001 - $50,000	VIII $50,001 - $100,000	IX $100,001 - $1,000,000	X $1,000,001 - $5,000,000	XI Over $5,000,000	P S E
	Steven Bacon Loan Receivable Orem, UT			X												X					X									
	David Cannon Loan Receivable Mclean, VA							X								X					X									
	Scott Crowley Loan Receivable Sandy, UT			X												X					X									
	Eugene Edwards - Loan Receivable San Diego, CA						X									X					X									
	Gerry Fox - Loan Receivable El Cajon, CA			X												X					X									
	Robert Fox - Loan Receivable Vienna, Austria			X												X					X									
	Premium Beef of Nebraska Loan Receivable Gordon, NE								X							X					X									
	Resort Ad & Promo Loan Receivable SLC, UT							X								X										X				
	Gary Ruse Loan Receivable Gordon, NE					X										X					X									
	Roger Sorenson Loan Receivable Boise, ID			X												X					X									
	Terra Nova Dist. Corp. Loan Receivable Midvale, UT						X									X									X					
	Chuck Warren Loan Receivable SLC, UT			X												X					X									
	Cannon Industries, Inc. Loan Receivable SLC, UT										X					X					X									
	Joe Cannon Loan Receivable Provo, UT						X									X					X									
	Advance Resin Systems, Inc. Common Stock, Des Plains									X				X						S-Corp Ord. Income								X			
	Automated Communication Group Common Stock SLC, UT					X								X							X									
	Business Support Services Common Stock SLC, UT		X											X							X									
	Cannon Industries, Inc. Common Stock SLC, UT							X						X							X									
	Terra Nova Dist. Corp. Common Stock Midvale, UT					X								X							X									
	Premium Beef of Nebraska Common Stock Gordon, NE						X							X							X									
	LJ Development Common Stock Sandy, UT							X						X							X									
	Raster Graphics Common Stock San Jose, CA							X						X							X									

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SCHEDULE III — ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Name CHRISTOPHER B. CANNON | Page 3 of 5

SP. DC. JT	BLOCK A Asset and/or Income Source	BLOCK B Year-End Value of Asset											BLOCK C Type of Income							BLOCK D Amount of Income										BLOCK E Transaction
		A None	B $1 – $1,000	C $1,001 – $15,000	D $15,001 – $50,000	E $50,001 – $100,000	F $100,001 – $250,000	G $250,001 – $500,000	H $500,001 – $1,000,000	I $1,000,001 – $5,000,000	J $5,000,001 – $25,000,000	K $25,000,001 – $50,000,000	L Over $50,000,000	DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Type of Income (Specify)	I None	II $1 – $200	III $201 – $1,000	IV $1,001 – $2,500	V $2,501 – $5,000	VI $5,001 – $15,000	VII $15,001 – $50,000	VIII $50,001 – $100,000	IX $100,001 – $1,000,000	X $1,000,001 – $5,000,000	XI Over $5,000,000	P, S, E
	Kyzen Corporation Common Stock Nashville, TN								X				X							X										
	Sundance Lot Sundance Canyon, UT						X													X										
	Mapleton Barn 875 East 1600 North Mapleton, UT						X													X										
	Heavy Equipment Springville, UT					X														X										
	Terrace Falls Condominium #714 SLC, UT							X												X										
	AIMC Bankruptcy Escrow Loans & Equip. Reno, NV							X												X										
	Auger Equipment Reno, NV					X														X										
	Home Mclean, VA									X				X											X						
	Shopping Com Common Stock Corona Del Mar, CA									X											X										

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SCHEDULE IV — TRANSACTIONS

Report any purchase, sale, or exchange by you, your spouse, or dependent child during the reporting year of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child, or the purchase or sale of your personal residence, unless it is rented out.

SP, DC, JT	Asset	Type of Transaction			Date	Amount of Transaction									
		PURCHASE	SALE	EXCHANGE		B	C	D	E	F	G	H	I	J	K
SP	*Example* — Mega Corporation Common Stock	X			10/2/97		X								
	Raster Graphics Common Stock San Jose, CA		X		Various							X			
	Kyzen Corporation Common Stock Nashville, TN		X		Various			X							
	Cannon Technologies merged with Cannon Industries SLC, UT			X	9/26/97							X			
	Shopping.Com Common Stock Corona Del Mar, CA	X			4/24/97					X					
	Home McLean, VA	X			6/30/97							X			
	Automated Communications Group loan exchanged for common stock SLC, UT			X	6/30/97			X							

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SCHEDULE V — LIABILITIES

Report liabilities of over $10,000 owed to any one creditor ***at any time*** during the reporting period by you, your spouse, or dependent child. Mark the highest amount owed during the year. **Exclude:** Any mortgage on your personal residence (unless it is rented out), loans secured by automobiles, household furniture, or appliances, and liabilities owed to a spouse, or the child, parent, or sibling of you or your spouse. Report ***revolving charge accounts*** only if the balance at the end of the reporting period exceeded $10,000.

SP, DC, JT	Creditor	Type of Liability	Amount of Liability									
			B $10,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H $1,000,001 - $5,000,000	I $5,000,001 - $25,000,000	J $25,000,001 - $50,000,000	K Over $50,000,000
	Example First Bank of Wilmington, Delaware	Mortgage on 123 Main St., Dover, Del.				X						
	Western Valley Nurseries Springville, UT	Landscaping	X									
	Chase Manhattan Mortgage New York, New York	Note Payable - Home McLean, Virginia							X			
	Crossland Mortgage Salt Lake City, Utah	Note Payable Terrace Falls Condominium			X							
	First Security Bank Salt Lake City, Utah	Note Payable - personal				X						
	First National Bank of Gordon Gordon, Nebraska	Note Payable - Business Int - Premium Beef of NE					X					

SCHEDULE VI — GIFTS

Report the source, a brief description, and the value of all gifts totalling more than $250 received by you, your spouse, or a dependent child from any source during the year.

Exclude: Gifts from relatives, gifts of personal hospitality of an individual, local meals, and gifts to a spouse or dependent child that are totally independent of his or her relationship to you. Gifts with a value of $100 or less need not be added towards the $250 disclosure threshold.

Note: The gift rule (House Rule 51) prohibits gifts except as specifically provided in the rule.

Source	Description	Value
Example Mr. Joseph H. Smith, Anytown, Anystate	Silver Platter (determination on personal friendship received from Comm ttee on Standards)	$270

Use additional sheets if more space is required.

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1997

FORM A
For use by Members, officers, and employees

RECEIVED
98 APR 22 PM 12: 12
HAND DELIVERED
(Office Use Only)

LOIS G. CAPPS
(Full Name)

1724 SANTA BARBARA STREET
(Mailing Address)

SANTA BARBARA, CALIFORNIA 93101
Daytime Telephone: 805-730-1710

Filer Status: [X] Member of the U.S. House of Representatives — State CALIFORNIA District 22nd; [ ] Officer or Employee — Employing Office

Report Type: [X] Annual (May 15); [ ] Amendment; [ ] Termination — Termination Date

A *$200 penalty* shall be assessed against anyone who files more than 30 days late.

PRELIMINARY INFORMATION — ANSWER EACH OF THESE QUESTIONS

I. Did you or your spouse have "earned" income (e.g., salaries or fees) of $200 or more from any source in the reporting period? **If yes, complete and attach Schedule I.**	Yes [X] No [ ]	VI. Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $250 and not otherwise exempt)? **If yes, complete and attach Schedule VI.**	Yes [ ] No [X]
II. Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? **If yes, complete and attach Schedule II.**	Yes [ ] No [X]	VII. Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $250 from one source)? **If yes, complete and attach Schedule VII.**	Yes [ ] No [X]
III. Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? **If yes, complete and attach Schedule III.**	Yes [X] No [ ]	VIII. Did you hold any reportable positions on or before the date of filing in the current calendar year? **If yes, complete and attach Schedule VIII.**	Yes [ ] No [X]
IV. Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset worth more than $1,000 in the reporting period? **If yes, complete and attach Schedule IV.**	Yes [ ] No [X]	IX. Did you have any reportable agreement or arrangement with an outside entity? **If yes, complete and attach Schedule IX.**	Yes [ ] No [X]
V. Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? **If yes, complete and attach Schedule V.**	Yes [X] No [ ]	Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.	

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION — ANSWER EACH OF THESE QUESTIONS

TRUSTS—Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child?	Yes [ ] No [X]
EXEMPTION—Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption?	Yes [ ] No [X]

CERTIFICATION — THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended. The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct or its designee. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil penalties and criminal sanctions (*See* 5 U.S.C. app. 4, §104 and 18 U.S.C. §1001)

SIGNATURE OF REPORTING INDIVIDUAL: Lois G. Capps

DATE (Month/Day/Year): 4-22-98

SCHEDULE I — EARNED INCOME

List the source, type, and amount of earned income from any source (other than the filer's current employment by the U.S. Government) totalling $200 or more during the preceding calendar year. For a spouse, list the source and amount of any honoraria; list only the source for other spouse earned income exceeding $1,000.

	Source	Type	Amount
Examples	Keene State	Approved Teaching Fee	$6,000
	State of Maryland	Legislative Pension	$9,000
	Civil War Roundtable (Oct. 2nd)	Spouse Speech	$1,000
	Ontario County Board of Education	Spouse Salary	NA
	PUBLICATION HOUSE-LUTHERAN CHURCH	SPOUSE ROYALTY	N/A

For payments to charity in lieu of honoraria, use Schedule II.

SCHEDULE III — ASSETS AND "UNEARNED" INCOME

Name LOIS G. CAPPS | Page 3 of 4

BLOCK A — Asset and/or Income Source

Identify (a) each asset held for investment or production of income with a fair market value exceeding $1,000 at the end of the reporting year, and (b) any other asset or source of in come which generated more than $200 in "unearned" income during the year For rental property or land, provide an address. Provide full names of any mutual funds. For an IRA or retirement plan that is *self-directed*, list the underlying assets worth more than $1,000. For an IRA or retirement plan that is not selfdirected, name the institution holding the account.

Exclude: Your personal residence(s) (unless there is rental income); any debt owed to you by your spouse, or by your or your spouse's child, parent, or sibling; any deposits totalling $5,000 or less in personal savings accounts; any financial interests in or income derived from U.S. Government retirement programs

If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC) or is jointly held (JT), in the optional column on the far left.

BLOCK B — Value of Asset

at close of reporting year. If you use a valuation method other than fair market value, please specify the method used. If an asset was sold and is included only because it generated income, the value should be "None."

BLOCK C — Type of Income

BLOCK D — Amount of Income

For IRA's and retirement plans that are *not* self-directed, you may write in "NA" for income.

BLOCK E — Transaction

Indicate if asset was purchased (P), sold (S), or exchanged (E) in reporting year.

	BLOCK A	BLOCK B												BLOCK C							BLOCK D											BLOCK E
		A None	B $1 – $1,000	C $1,001 – $15,000	$15,001 – $50,000	E $50,001 – $100,000	F $100,001 – $250,000	G $250,001 – $500,000	H $500,001 – $1,000,000	I $1,000,001 – $5,000,000	J $5,000,001 – $25,000,000	K $25,000,001 – $50,000,000	L Over $50,000,000	DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Type of Income (Specify. For Example: Partnership Income or Farm Income)	I None	II $1 – $200	III $201 – $1,000	IV $1,001 – $2,500	V $2,501 – $5,000	VI $5,001 – $15,000	VII $15,001 – $50,000	VIII $50,001 – $100,000	IX $100,001 – $1,000,000	X $1,000,001 – $5,000,000	XI Over $5,000,000	P, S, E
SP.																															
DC.	*Examples*		Indefinite			X								X						Royalties											P
JT.							X									X															
	MID STATE BANK			X												X							X								I
	FIDELITY MAGELLAN FD					X								X											X						
	MET LIFE MONEY MRKT						X									X							X								
	396 VESTER STED							X						X												X					

For additional assets and unearned income, use next page.

SCHEDULE V — LIABILITIES

Report liabilities of over $10,000 owed to any one creditor ***at any time*** during the reporting period by you, your spouse, or dependent child. Mark the highest amount owed during the year. **Exclude:** Any mortgage on your personal residence (unless it is rented out); loans secured by automobiles, household furniture, or appliances; and liabilities owed to a spouse, or the child, parent, or sibling of you or your spouse. Report ***revolving charge accounts*** only if the balance at the end of the reporting period exceeded $10,000

SP, DC, JT	Creditor	Type of Liability	Amount of Liability									
			B $10,001 – $15,000	C $15,001 – $50,000	D $50,001 – $100,000	E $100,001 – $250,000	F $250,001 – $500,000	G $500,001 – $1,000,000	H $1,000,001 – $5,000,000	I $5,000,001 – $25,000,000	J $25,000,001 – $50,000,000	K Over $50,000,000
	Example First Bank of Wilmington, Delaware	Mortgage on 123 Main St., Dover, Del				X						
	BANK UNITED FSB	MORTGAGE ON 396 VESTER STED, SOLVANG				X						

SCHEDULE VI — GIFTS

Report the source, a brief description, and the value of all gifts totalling more than $250 received by you, your spouse, or a dependent child from any source during the year.

Exclude: Gifts from relatives, gifts of personal hospitality of an individual, local meals, and gifts to a spouse or dependent child that are totally independent of his or her relationship to you. Gifts with a value of $100 or less need not be added towards the $250 disclosure threshold.

Note: The gift rule (House Rule 51) prohibits gifts except as specifically provided in the rule.

Source	Description	Value
Example Mr. Joseph H. Smith, Anytown, Anystate	Silver Platter (determination on personal friendship received from Committee on Standards)	$270
N/A		

Use additional sheets if more space is required.

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UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1997

FORM A
For use by Members, officers, and employees

BENJAMIN L. CARDIN
(Full Name)

9 Whitebridge Court
Baltimore, Maryland 21208
(Mailing Address)

410-433-8886
Daytime Telephone

HAND DELIVERED (10)
(Office Use Only)

Filer Status	[X] Member of the U S House of Representatives	State Maryland District 3rd	[ ] Officer or Employee	Employing Office
Report Type	[X] Annual (May 15)	[ ] Amendment	[ ] Termination	Termination Date

A *$200 penalty* shall be assessed against anyone who files more than 30 days late.

PRELIMINARY INFORMATION — ANSWER EACH OF THESE QUESTIONS

I Did you or your spouse have "earned" income (e g , salaries or fees) of $200 or more from any source in the reporting period? **If yes, complete and attach Schedule I.** — Yes [X] No [ ]

II Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? **If yes, complete and attach Schedule II.** — Yes [X] No [ ]

III Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? **If yes, complete and attach Schedule III.** — Yes [X] No [ ]

IV Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset worth more than $1,000 in the reporting period? **If yes, complete and attach Schedule IV.** — Yes [X] No [ ]

V Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? **If yes, complete and attach Schedule V.** — Yes [X] No [ ]

VI Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i e., aggregating more than $250 and not otherwise exempt)? **If yes, complete and attach Schedule VI.** — Yes [ ] No [X]

VII Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $250 from one source)? **If yes, complete and attach Schedule VII.** — Yes [X] No [ ]

VIII Did you hold any reportable positions on or before the date of filing in the current calendar year? **If yes, complete and attach Schedule VIII.** — Yes [X] No [ ]

IX Did you have any reportable agreement or arrangement with an outside entity? **If yes, complete and attach Schedule IX.** — Yes [X] No [ ]

Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION — ANSWER EACH OF THESE QUESTIONS

TRUSTS—Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child? — Yes [ ] No [X]

EXEMPTION—Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption? — Yes [ ] No [X]

CERTIFICATION — THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct or its designee Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil penalties and criminal sanctions (*See* 5 U S C app 4, §104 and 18 U S C §1001).

SIGNATURE OF REPORTING INDIVIDUAL — Benjamin L. Cardin

DATE (Month/Day/Year) — May 12, 1998

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Name	BENJAMIN L. CARDIN	Page 2 of 16

SCHEDULE I — EARNED INCOME

List the source, type, and amount of earned income from any source (other than the filer's current employment by the U.S. Government) totalling $200 or more during the preceding calendar year For a spouse, list the source and amount of any honoraria; list only the source for other spouse earned income exceeding $1,000

Source	Type	Amount
Examples Keene State	Approved Teaching Fee	$6,000
State of Maryland	Legislative Pension	$9,000
Civil War Roundtable (Oct 2nd)	Spouse Speech	$1,000
Ontario County Board of Education	Spouse Salary	NA
State of Maryland	Legislative Pension	$3928
Md. Assoc. of Non-public Special Education Facilities	Spouse's Salary	N/A

For payments to charity in lieu of honoraria, use Schedule II.

SCHEDULE II — PAYMENTS IN LIEU OF HONORARIA MADE TO CHARITY

List the source, activity (i e , speech, appearance, or article), date, and amount of any payment made by the sponsor of an event to a charitable organization in lieu of an honorarium. A separate confidential list of charities receiving such payments must be filed directly with the Committee on Standards of Official Conduct An envelope for transmitting the list is included in each Member's filing package.

Source	Activity	Date	Amount
Examples Association of American Associations, Wash , D C XYZ Magazine	Speech Article	Feb 2, 1997 Aug 13, 1997	$2,000 $500
Association of American Medical Colleges Washington, D.C.	Speech	Sept. 17,1997	$2000

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SCHEDULE III — ASSETS AND "UNEARNED" INCOME

Name BENJAMIN L. CARDIN | Page 4 of 16

BLOCK A — Asset and/or Income Source

Identify (a) each asset held for investment or production of income with a fair market value exceeding $1,000 at the end of the reporting year, and (b) any other asset or source of income which generated more than $200 in "unearned" income during the year. For rental property or land, provide an address. Provide full names of any mutual funds. For an IRA or retirement plan that is *self-directed*, list the underlying assets worth more than $1,000. For an IRA or retirement plan that is not selfdirected, name the institution holding the account.

Exclude: Your personal residence(s) (unless there is rental income); any debt owed to you by your spouse, or by your or your spouse's child, parent, or sibling; any deposits totalling $5,000 or less in personal savings accounts; any financial interests in or income derived from U.S. Government retirement programs.

If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC) or is jointly held (JT), in the optional column on the far left

BLOCK B — Value of Asset

at close of reporting year.
If you use a valuation method other than fair market value, please specify the method used.
If an asset was sold and is included only because it generated income, the value should be "None."

BLOCK C — Type of Income

BLOCK D — Amount of Income

For IRA's and retirement plans that are *not* self-directed, you may write in "NA" for income.

BLOCK E — Transaction

Indicate if asset was purchased (P), sold (S), or exchanged (E) in reporting year.

	BLOCK A		BLOCK B												BLOCK C							BLOCK D											BLOCK E
			A None	B $1 – $1,000	C $1,001 – $15,000	$15,001 – $50,000	E $50,001 – $100,000	F $100,001 – $250,000	G $250,001 – $500,000	H $500,001 – $1,000,000	I $1,000,001 – $5,000,000	J $5,000,001 – $25,000,000	K $25,000,001 – $50,000,000	L Over $50,000,000	DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Type of Income (Specify For Example, Partnership Income or Farm Income)	I None	II $1 – $200	III $201 – $1,000	IV $1,001 – $2,500	V $2,501 – $5,000	VI $5,001 – $15,000	VII $15,001 – $50,000	VIII $50,001 – $100,000	IX $100,001 – $1,000,000	X $1,000,001 – $5,000,000	XI Over $5,000,000	
SP		SP																															
DC	*Examples*			Indefinite																	Royalties												P
JT																																	
		Mega Corp Stock					X								X																		
		Simon & Schuster																															
		1st Bank of Paducah, KY accounts						X								X										X							
	Olin Corporation Common Stock				X									X									X										
	Bristol Myers Squibb Co. Common Stock							X						X											X								P
	Time Warner Common Stock				X									X								X											
	BHC Communications, Inc Common Stock				X									X								X											
	Niagara Mohawk Common Stock				X									X								X											
NOTE 1	Comsat Corp. Common Stock				X									X									X										

For additional assets and unearned income, use next page.

SCHEDULE III — ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Name BENJAMIN L. CARDIN | Page 5 of 16

	SP, DC, JT	BLOCK A: Asset and/or Income Source	BLOCK B: Year-End Value of Asset — A: None	B: $1 - $1,000	C: $1,001 - $15,000	D: $15,001 - $50,000	E: $50,001 - $100,000	F: $100,001 - $250,000	G: $250,001 - $500,000	H: $500,001 - $1,000,000	I: $1,000,001 - $5,000,000	J: $5,000,001 - $25,000,000	K: $25,000,001 - $50,000,000	L: Over $50,000,000	BLOCK C: Type of Income — DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Type of Income (Specify)	BLOCK D: Amount of Income — I: None	II: $1 - $200	III: $201 - $1,000	IV: $1,001 - $2,500	V: $2,501 - $5,000	VI: $5,001 - $15,000	VII: $15,001 - $50,000	VIII: $50,001 - $100,000	IX: $100,001 - $1,000,000	X: $1,000,001 - $5,000,000	XI: Over $5,000,000	BLOCK E: Transaction
		Ascent Entertainment Group, Inc. Common Stock			X										X							X											P
NOTE 2		Primex Technologies,Inc. Common Stock			X										X								X											
	JT	Smith, Barney -Jt.Acc't with spouse -following assets:																																
		1. Prince George's Co. Bond				X									No income Zero coupon																			I
		2. Cash Management Acc't			X										X									X										
	SP	Northeast Util. Common Stock			X										X								X										
		A.T.&T. Common Stock				X									X									X										
		Lucent Technologies,Inc. Common Stock			X										X								X										
		Agareon Pharmaceuticals, Inc. Common Stock			X										X							X											
	JT	Md. Health & Higher Ed Bond (Alex Brown Account)			X												X						X										
	JT	Israel Bonds			X												X						X										
	JT	Meyer M. Cardin Trust NOTE 3							X								X											X					P/S
NOTE 4		Venture BG Partnership c/o B. Green & Co. Balto., Md.		X	(negative cap. acc't)																J(c) Distrib.	X	(loss)			X							
		Keough - A.B.A. Retire Plan Benj. L. Cardin Retirement Plan							X												N/A												
	SP	Deferred Comp. Plan - Spouse's Employment				X															N/A												
	SP	T.I.A.A. Cref Retire. Pension Plans-Spouse Employment			X																N/A												

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SCHEDULE III — ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Name: BENJAMIN L. CARDIN | Page 6 of 16

	SP, DC, JT	BLOCK A: Asset and/or Income Source	BLOCK B: Year-End Value of Asset											BLOCK C: Type of Income							BLOCK D: Amount of Income										BLOCK E: Transaction
			A None	B $1 - $1,000	C $1,001 - $15,000	D $15,001 - $50,000	E $50,001 - $100,000	F $100,001 - $250,000	G $250,001 - $500,000	H $500,001 - $1,000,000	I $1,000,001 - $5,000,000	J $5,000,001 - $25,000,000	K $25,000,001 - $50,000,000	L Over $50,000,000	DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Type of Income (Specify)	I None	II $1 - $200	III $201 - $1,000	IV $1,001 - $2,500	V $2,501 - $5,000	VI $5,001 - $15,000	VII $15,001 - $50,000	VIII $50,001 - $100,000	IX $100,001 - $1,000,000	X $1,000,001 - $5,000,000	XI Over $5,000,000	P, S, E
OTE 5		IRAs - Regal Sav. Bank Owings Mills, Md. Assets include:																													
		1. Israel Bonds				X															N/A										
		2. Money Market Funds			X																N/A										
		Benjamin L. Cardin Trust Settlor NOTES 6 & 7					X															X									
		Cong. Credit Union			X											X							X								
	JT	Dean Witter - Jt. Acc't with spouse - following assets:																													
		1. Colonial Util.Fund				X									X									X								1
		2. Keystone Custodian Fund (A/K/A Evergreen Small Growth Fund)	X															X				X										S
		3. Dean Witter Global Div. Growth Fund				X									X			X						X		X						P
		4. Putnam Global Growth Fund				X									X			X							X	X						P
		5. AIM Value Fund B				X									X			X							X	X						P
		6. Cash Management Account			X												X							X	X							
		7. Mid Atlantic Realty Trust			X										X									X								1
		Dean Witter Acc't -Benj. L. Cardin - following assets:																													
		1. Wash. Sub. San.Bond			X												X							X								S
		2. Howard Co.,Md.Bond			X												X								X							S
		3. U.of Md. Bonds					X										X									X						
		4. Md. Com.Dev.Bond			X												X							X								
		5. Anne Arundel Co., Md. Bond			X												X								X							S

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SCHEDULE III — ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Name: BENJAMIN L. CARDIN

SP, DC, JT	BLOCK A: Asset and/or Income Source	BLOCK B: Year-End Value of Asset											BLOCK C: Type of Income						BLOCK D: Amount of Income										BLOCK E: Transaction
		A None	B $1 – $1,000	C $1,001 – $15,000	D $15,001 – $50,000	E $50,001 – $100,000	F $100,001 – $250,000	G $250,001 – $500,000	H $500,001 – $1,000,000	I $1,000,001 – $5,000,000	J $5,000,001 – $25,000,000	K $25,000,001 – $50,000,000	L Over $50,000,000	DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Type of Income (Specify)	I None	II $1 – $200	III $201 – $1,000	IV $1,001 – $2,500	V $2,501 – $5,000	VI $5,001 – $15,000	VII $15,001 – $50,000	VIII $50,001 – $100,000	IX $100,001 – $1,000,000	X $1,000,001 – $5,000,000	XI Over $5,000,000	P, S, E
	6. Seligman Bond Fund				X											X								X						
	7. Md. Health & Higher Ed. Bond			X												X	X					X								
	8. Md. Tax Free Bond Fund 76					X										X						X								
	9. Annapolis, Md. Bond				X											X									X					S
	10. Md. State Bond				X											X						X								
	11. Smith, Barney Int. Munc. Bond Fund				X											X	X							X						
	12. Eaton Vance Munc. Trust				X											X						X								
	13. Md. Inv. Quality Tax Exempt Trust Series 44			X												X						X								P
	14. Md. Tax Free Bond Trust 70			X												X						X								S
	15. Md. Tax Free Bond Trust 71 (Trust283			X												X							X								S
	16. Md. Tax Free Bond Trust 79				X											X							X								
	17. Md. Tax Free Bond Trust 84				X											X							X								
	18. Nuveen Md. Pre. Munc. Fund				X											X							X								
	19. Tax Exempt Sec. Trust 374 Tk 32					X										X								X							
	20. Delaware Group Div & Inc. Fund				X									X										X							
	21. Putnam Fund for Growth & Income B						X							X										X	X						P
	22. Am. Cap. Equity Inc. Fund B				X									X			X							X							P
	23. GT Global Telecom. Fund B				X												X							X							
	24. Dean Witter Cash Management Account				X									X									X								P/S

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SCHEDULE III — ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Name BENJAMIN L. CARDIN | Page 8, of 16

	BLOCK A	BLOCK B											BLOCK C							BLOCK D										BLOCK E
	Asset and/or Income Source	Year-End Value of Asset											Type of Income							Amount of Income										Transaction
SP. DC. JT		A None	B $1 - $1,000	C $1,001 - $15,000	D $15,001 - $50,000	E $50,001 - $100,000	F $100,001 - $250,000	G $250,001 - $500,000	H $500,001 - $1,000,000	I $1,000,001 - $5,000,000	J $5,000,001 - $25,000,000	K $25,000,001 - $50,000,000	L Over $50,000,000	DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Type of Income (Specify)	I None	II $1 - $200	III $201 - $1,000	IV $1,001 - $2,500	V $2,501 - $5,000	VI $5,001 - $15,000	VII $15,001 - $50,000	VIII $50,001 - $100,000	IX $100,001 - $1,000,000	X $1,000,001 - $5,000,000	XI Over $5,000,000	P, S, E
	25. Colonial Trust Util. Fund Class B (Tr. IV)				X								X										X							
	26. Dean Witter Select Munc. Md. Fund			X											X								X							
	27. Md. Dept. of Trans. Bond			X											X								X							
	28. Frederick Co., Md. Bond				X										X									X						
	29. Keystone Small Co. Growth	X														X				X										S
	30. Dean Witter Amer. Value Fund			X									X			X						X	X							P
NOTE 2	Ultrasound, Inc. Common Stock			X									X							X										I

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SCHEDULE IV — TRANSACTIONS

Report any purchase, sale, or exchange by you, your spouse, or dependent child during the reporting year of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child, or the purchase or sale of your personal residence, unless it is rented out.

SP, DC, JT	Asset	Type of Transaction: PURCHASE	SALE	EXCHANGE	Date (MO/DAY/YR)	Amount of Transaction: B ($1,001–$15,000)	C ($15,001–$50,000)	D ($50,001–$100,000)	E ($100,001–$250,000)	F ($250,001–$500,000)	G ($500,001–$1,000,000)	H ($1,000,001–$5,000,000)	I ($5,000,001–$25,000,000)	J ($25,000,001–$50,000,000)	K (Over $50,000,000)
SP	*Example* Mega Corporation Common Stock	X			10-12-97		X								
JT	Keystone Custodian Fund (Dean Witter Account - Joint) A/K/A Evergreen Small Co. Growth Fund		X		4-11-97		X								
JT	Putnam Global Growth Fund (Dean Witter Account - Joint)	X			12-31-97 NOTE 8	X									
JT	AIM Value Fund, Class B (Dean Witter Account - Joint)	X			12-15-97 NOTE 8	X									
	Bristol Myers Squibb Co. Common Stock	X			Quarterly NOTE 8	X									
JT	Dean Witter Global Div. Growth Fund (Dean Witter Account - Joint)	X			Quarterly NOTE 8	X									
	Eaton Vance Munc. Trust (Dean Witter Account)	X			Monthly NOTE 8	X									
	Putnam Fund for Growth & Income B (Dean Witter Account)	X			Quarterly NOTE 8	X									
	Putnam Fund for Growth & Income B (Dean Witter Account)	X			9-17-97	X									
	American Capital Equity Income Fund B (Dean Witter Account)	X			Quarterly NOTE 8	X									
	Keystone Small Co. Growth (Dean Witter Account)		X		4-11-97	X									
	Dean Witter American Value Fund (Dean Witter Account)	X			Semi-Ann. NOTE 8	X									
	GT Global Telecommunications Fund B (Dean Witter Account)	X			12-8-97 NOTE 8	X									
	GT Global Telecommunications Fund B (Dean Witter Account)		X		9-12-97	X									
	Md. Tax Free Bond Trust 70 (Dean Witter Account)	return of principle			8-15-97	X									
	Meyer M. Cardin Trust - See NOTE 3														

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SCHEDULE IV — TRANSACTIONS

Report any purchase, sale, or exchange by you, your spouse, or dependent child during the reporting year of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child, or the purchase or sale of your personal residence, unless it is rented out.

SP, DC, JT	Asset	Type of Transaction: PURCHASE	SALE	EXCHANGE	Date (MO/DAY/YR)	Amount of Transaction: B ($1,001–$15,000)	C ($15,001–$50,000)	D ($50,001–$100,000)	E ($100,001–$250,000)	F ($250,001–$500,000)	G ($500,001–$1,000,000)	H ($1,000,001–$5,000,000)	I ($5,000,001–$25,000,000)	J ($25,000,001–$50,000,000)	K (Over $50,000,000)
SP	*Example* Mega Corporation Common Stock	X			10-12-97		X								
	Md. Tax Free Bond Trust 71 (Dean Witter Account)	return of principle			2-15-97 6-15-97 8-15-97	X									
	Md. Tax Free Bond Trust 76 (Dean Witter Account)	return of principle			1-15-97 4-15-97 6-15-97 8-15-97	X									
	Washington Suburban San. Bond (Dean Witter Account)	redeemed	X		1-2-97	X									
	Anne Arundel Co., Md. Bond (Dean Witter Account)	redeemed	X		6-30-97	X									
	Anne Arundel Co., Md. Bond (Dean Witter Account)	redeemed	X		6-20-97	X									
	Howard Co., Md. Bond (Dean Witter Account)	redeemed	X		7-1-97		X								
	Ascent Entertainment Group, Inc. Common Stock	X	NOTE 1		6-27-97	X									

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SCHEDULE V — LIABILITIES

Report liabilities of over $10,000 owed to any one creditor ***at any time*** during the reporting period by you, your spouse, or dependent child. Mark the highest amount owed during the year. **Exclude:** Any mortgage on your personal residence (unless it is rented out), loans secured by automobiles, household furniture, or appliances, and liabilities owed to a spouse, or the child, parent, or sibling of you or your spouse. Report ***revolving charge accounts*** only if the balance at the end of the reporting period exceeded $10,000.

SP, DC, JT	Creditor	Type of Liability	Amount of Liability									
			B $10,001 – $15,000	C $15,001 – $50,000	D $50,001 – $100,000	E $100,001 – $250,000	F $250,001 – $500,000	G $500,001 – $1,000,000	H $1,000,001 – $5,000,000	I $5,000,001 – $25,000,000	J $25,000,001 – $50,000,000	K Over $50,000,000
	Example First Bank of Wilmington, Delaware	Mortgage on 123 Main St., Dover, Del				X						
	See NOTE 4 for liabilities of Venture B.G. Partnership											
	See NOTE 6 for Liabilities of Benjamin L. Cardin Trust (Settlor) including Green Properties Partnership											

SCHEDULE VI — GIFTS N/A

Report the source, a brief description, and the value of all gifts totalling more than $250 received by you, your spouse, or a dependent child from any source during the year.

Exclude: Gifts from relatives, gifts of personal hospitality of an individual, local meals, and gifts to a spouse or dependent child that are totally independent of his or her relationship to you. Gifts with a value of $100 or less need not be added towards the $250 disclosure threshold.

Note: The gift rule (House Rule 51) prohibits gifts except as specifically provided in the rule.

Source	Description	Value
Example Mr. Joseph H. Smith, Anytown, Anystate	Silver Platter (determination on personal friendship received from Committee on Standards)	$270

Use additional sheets if more space is required.

SCHEDULE VII —TRAVEL PAYMENTS AND REIMBURSEMENTS

Identify the source and list travel itinerary, dates, and nature of expenses provided for travel and travel-related expenses totalling more than $250 received by you, your spouse, or a dependent child during the reporting period. Indicate whether a family member accompanied the traveler at the sponsor's expense, and the amount of time, if any, that was not at the sponsor's expense. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor.

Exclude: Travel-related expenses provided by federal, state, and local governments, or by a foreign government required to be separately reported under the Foreign Gifts and Decorations Act (5 U.S.C. § 7342); travel paid for by a Federal political committee; travel provided to a spouse or dependent child that is totally independent of his or her relationship to you.

Source	Date(s)	Point of Departure—Destination—Point of Return	Lodging? (Y/N)	Food? (Y/N)	Was a Family Member Included? (Y/N)	Any time not at sponsor's expense
Examples Chicago Chamber of Commerce	Mar. 2	Wash., D.C.—Chicago—Wash., D.C.	N	N	N	N
Roycroft Corporation	Aug. 6–13	Wash., D.C.—Los Angeles—Cleveland	Y	Y	Y	4 Days
The Aspen Institute Bipartisan Cong. Retreat	Mar- 7-9, 1997	Balto., Md. - Hershey, Pa. - Balto., Md. (Transportation paid for personaly)	Y	Y	Y	N
American College of Gastroenterology	Nov. 1-3, 1997	Balto., Md. - Chicago, Ill. - Balto., Md.	Y	Y	Y	N

This page may be copied if more space is required.

SCHEDULE VIII — POSITIONS

Report all positions, compensated or uncompensated, held during the current calendar year as an officer, director, trustee of an organization, partner, proprietor, representative, employee, or consultant of any corporation, firm, partnership, or other business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States

Exclude: Positions held in any religious, social, fraternal, or political entities; positions solely of an honorary nature; and positions listed on Schedule I.

Position	Name of Organization
	SEE ATTACHED SHEET

SCHEDULE IX — AGREEMENTS

Identify the date, parties to, and general terms of any agreement or arrangement with respect to: future employment; a leave of absence during the period of government service; continuation or deferral of payments by a former or current employer other than the U.S. Government, or continuing participation in an employee welfare or benefit plan maintained by a former employer.

Date	Parties To	Terms of Agreement
1-2-87 (Retired)	Filer and the State of Maryland	As a "retiree" from State service, I receive pension benefits (reported Part I) and the right to participate in health insurance with employer subsidizing some of the cost.

GPO 1998 46-260 (mac)

Use additional sheets if more space is required.

ETHICS IN GOVERNMENT ACT
FINANCIAL DISCLOSURE STATEMENT
BENJAMIN L. CARDIN
PART VIII POSITIONS

POSITION	NAME OF ORGANIZATION
Trustee	St. Mary's College; St. Mary's City, Md
Board Member	Menorah Lodge #771; B'nai B'rith; Balto., Md.
Board of Visitors	University of Maryland Law School; Balto., Md.
Technical Review Committee	Md. Psychiatric Research Center; Balto., Md.
Board of Advisors	Balto. Zionist District; Balto., Md.
Member	President's Advisory Board; University of Md Balto. Co.;Catonsville, Md
Co-chair, Advisory Board	Md. Education Coalition; Balto., Md
Advisory Committee	Lawyer's Campaign Against Hunger; Balto., Md
Partner	Partnerships listed in PARTS II & III (Venture BG, Green Properties and Warwick Associates)
Member	Chancellor's Advisory Council, University of Md System; College Park, Md.
Member	Md. Dept. of Business & Economic Developement Day Care Financing Program Advisory Board; Balto., Md
Community Relation Cabinet	Jewish Federation of Howard Co.; Columbia, Md
Board Member	Community Assistance Network; Dundalk, Md

ETHICS IN GOVERNMENT ACT
FINANCIAL DISCLOSURE STATEMENT
BENJAMIN L. CARDIN
NOTES

[1] In addition to dividend income from Comsat Corp. received stock in Ascent Entertainment Group, Inc.

[2] Last year value less than $1000; listed this year because value exceeded $1000

[3] A trust established by filer's father for the benefit of filer and spouse during their lifetime with remainderman interest to filer's children. The Trust held the following reportable Assets and had the following reportable Transactions in 1997: (1) U.S. Treasury Note, Value of Asset Category "A" none; Income - interest, Category "v" $2,501 - $5,000; capital gains, Category "iii" $201 - $1,000; Transaction: S - matured, 2/15/97, Category "E" $100,001 - $250,000; (2) Federal Home Loan Notes, Value of Asset Category "F" $100,001 - $250,000; Income - interest, Category "vii" $15,001 - $50,000; Transaction: S matured 10/15/97, Category "D" $50,001 - $100,000; Transaction: S Return of Principal, monthly, Category "C" $15,001 - $50,000; (3) Fannie Mae Notes, Value of Asset Category "E" $50,001 - $100,000; Income - interest, Category "v" $2,501 - $5,000; Transaction: S Return of Principal, monthly, Category "B" $1,001 - $15,000; (4) FNG 95 Note, Value of Asset Category "C" $1,001 - $15,000; Income - interest, Category "iv" $1,001 - $2,500; Transaction: S Return of Principal, monthly, Category "B" $1,001 - $15,000; (5) Prince George's Co., Md. Bonds, Value of Asset Category "D" $15,001 - $50,000; Income - interest, Category "iii" $201 - $1,000; Transaction: P - purchased August 1, 1997 and November 5, 1997, Category "C" $15,001 - $50,000; (6) Baltimore, Md. Bonds, Value of Asset Category "D" $15,001 - $50,000; Income - interest, Category "i" none; Transaction: P - purchased October 3, 1997 and December 2, 1997, Category "C" $15,001 - $50,000; (7) Baltimore County, Md. Bonds, Value of Asset, Category "D" $15,001 - $50,000; Income - interest, Category "i" none; Transaction: P purchase October 7, 1997 and December 4, 1997, Category "C" $15,001 - $50,000; (8) Md. State Higher Education and Health Bond, Value of Asset, Category "E" $50,001 - $100,000; Income - interest, Category "i" none; Transaction: P purchase October 20, 1997, Category "D" $50,001 - $100,000; (9) Md. Stadium Bond, Value of Asset, Category "C" $1,001 - $15,000; Income - interest, Category "ii" $1 - $200; Transaction: P purchase October 31, 1997, Category "C" $1,001 - $15,000; (10) Howard Co., Md. Bond, Value of Asset, Category "D" $15,001 - $50,000; Income - interest, Category "i" none, Transaction: P purchase November 19, 1997, Category "C" $15,001 - $50,000; (11) Washington Metro Area Transit Bond, Value of Asset, Category "D" $15,001 - $50,000; Income - interest, Category "i" none; Transaction: P purchase December 2, 1997, Category "C" $15,001 - $50,000; (12) Md. State Bond, Value of Asset, Category "C" $1,001 - $15,000; Income - interest, Category "i" none; Transaction: P purchase December 5, 1997, Category "B" $1,001 - $15,000; and (13) U.S. Government Money Market Fund, Value of Asset, Category "C" $1,001 - $15,000; Income - interest, Category "iv" $1,001 - $2,500; Transaction: P/S cash management account for investments listed above

[4] Venture BG is a partnership that holds the land at 3601 Washington Blvd., Balto., Md. The property is leased to Nash Finch. The filer owns a 2% interest. The evaluation is based on book value. Income reflected on Part III represents "income" J(c) line on K1 form (12 month reporting period ending 6/28/97) which was a loss and "distributions" represents actual cash distributions received in 1997 rather than amount from line J(d) of K1 (since K1 is for the 12 month period ending 6/28/97). The Asset: of the partnership is as follows: 3601 Washington Blvd., Balto., Md., Value of Asset Category "J" $5,000,001 - $25,000,000; Income - rent Category "x" $1,000,001 - $5,000,000. The Liabilities: of the partnership are as follows: (1) Mellon Mortgage Co. (transferee from Merrill, Lynch and Provident National Indemnity) Pittsburgh, Pa., mortgage on 3601 Washington Blvd., Balto., Md., Amount of Liability Category "I" $5,000,001 - $25, 000,000 and (2) B Green and Co., Inc., loan, Amount of Liability Category "E" $100,001 - $250,000

[5] Includes IRAs for filer and spouse

[6] A trust established by filer on June 29, 1990, for the benefit of spouse during her lifetime with remainderman interest to filer's children. The trust holds a one-sixth interest in a partnership known as Green Properties. That partnership owns property located at 1300 S. Monroe St., Balto., Md. and 2330 N. Warwick Ave., Balto., Md. (through a partnership known as Warwick Associates). Both properties are leased to B. Green & Co., Inc. In addition the trust purchased life insurance in March, 1991. The Assets of the trust and partnerships are as follows: A one-sixth partnership interest in Green Properties Partnership whose assets include: (1) 1300 S. Monroe St., Balto , Md., Value of Asset Category "I" $1,000,001 - $5,000,000, Income - rent Category "ix" $100,001 - $1,000,000 and (2) Warwick Associates partnership whose assets include 2330 N Warwick Ave, Balto., Md. (including equipment), Value of Asset Category "H" $500,001 - $1,000,000, Income - rent Category "viii" $50,001 - $100,000. The Liabilities of Green Properties Partnership include: (1) Provident Bank of Maryland, mortgage on 1300 S Monroe St., Balto., Md., Amount of Liability Category "H" $1,000,001 - $5,000,000 and (2) Bank of Balto., Towson, Md. (liability of Warwick Associates partnership), mortgage on 2330 N. Warwick Ave , Balto , Md., Amount of Liability Category "F" $250,001 - $500,000

[7] Evaluation based on an informal option given on 8/17/95 to B. Green & Co., Inc. to purchase trust interest in Green Properties Partnership

[8] Purchases made automatically through dividend and/or distribution reinvestment program with company

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1997

FORM A
For use by Members, officers, and employees

RECEIVED
99 MAY 15 PM 12:16

JULIA MAE CARSON
(Full Name)

2530 NORTH PARK AVENUE, INDIANAPOLIS, INDIANA 46205
(Mailing Address)

202-225-4011
Daytime Telephone

MC HAND DELIVERED
(Office Use Only)

Filer Status	[X]	Member of the U S House of Representatives	State INDIANA District 10	[ ]	Officer or Employee	Employing Office
Report Type	[X]	Annual (May 15)	[ ] Amendment	[ ]	Termination	Termination Date

A *$200 penalty* shall be assessed against anyone who files more than 30 days late.

PRELIMINARY INFORMATION — ANSWER EACH OF THESE QUESTIONS

I Did you or your spouse have "earned" income (e g , salaries or fees) of $200 or more from any source in the reporting period? **If yes, complete and attach Schedule I.** — Yes [X] No [ ]

II Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? **If yes, complete and attach Schedule II.** — Yes [X] No [ ]

III Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? **If yes, complete and attach Schedule III.** — Yes [X] No [ ]

IV Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset worth more than $1,000 in the reporting period? **If yes, complete and attach Schedule IV.** — Yes [ ] No [X]

V Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? **If yes, complete and attach Schedule V.** — Yes [ ] No [X]

VI. Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i e , aggregating more than $250 and not otherwise exempt)? **If yes, complete and attach Schedule VI** — Yes [ ] No [X]

VII. Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $250 from one source)? **If yes, complete and attach Schedule VII.** — Yes [ ] No [X]

VIII. Did you hold any reportable positions on or before the date of filing in the current calendar year? **If yes, complete and attach Schedule VIII.** — Yes [ ] No [X]

IX. Did you have any reportable agreement or arrangement with an outside entity? **If yes, complete and attach Schedule IX.** — Yes [ ] No [X]

Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION — ANSWER EACH OF THESE QUESTIONS

TRUSTS—Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child? — Yes [ ] No [X]

EXEMPTION—Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption? — Yes [ ] No [X]

CERTIFICATION — THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct or its designee Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil penalties and criminal sanctions (*See* 5 U S C app 4, §104 and 18 U S C §1001)

SIGNATURE OF REPORTING INDIVIDUAL Julia M Carson

DATE (Month/Day/Year) 5-13-98

SCHEDULE I — EARNED INCOME

List the source, type, and amount of earned income from any source (other than the filer's current employment by the U.S. Government) totalling $200 or more during the preceding calendar year. For a spouse, list the source and amount of any honoraria; list only the source for other spouse earned income exceeding $1,000.

Source	Type	Amount
Examples Keene State	Approved Teaching Fee	$6,000
State of Maryland	Legislative Pension	$9,000
Civil War Roundtable (Oct. 2nd)	Spouse Speech	$1,000
Ontario County Board of Education	Spouse Salary	NA
STATE OF INDIANA	LEGISLATIVE PENSION	$5,687
CUMMINS ENGINE COMPANY, INC	EMPLOYEE PENSION	$1,252

For payments to charity in lieu of honoraria, use Schedule II.

Name HON. JULIA CARSON	Page 3 of 4

SCHEDULE II — PAYMENTS IN LIEU OF HONORARIA MADE TO CHARITY

List the source, activity (i.e., speech, appearance, or article), date, and amount of any payment made by the sponsor of an event to a charitable organization in lieu of an honorarium. A separate confidential list of charities receiving such payments must be filed directly with the Committee on Standards of Official Conduct. An envelope for transmitting the list is included in each Member's filing package.

Source	Activity	Date	Amount
Examples Association of American Associations, Wash., D.C. XYZ Magazine	Speech Article	Feb. 2, 1997 Aug. 13, 1997	$2,000 $500
NATIONAL COUNCIL OF NEGRO WOMEN, INDIANAPOLIS, INDIANA	SPEECH	JUNE 14,1997	$1,000

This page may be copied if more space is required.

Name HON. JULIA CARSON | Page 4 of 4

SCHEDULE III — ASSETS AND "UNEARNED" INCOME

BLOCK A — Asset and/or Income Source

Identify (a) each asset held for investment or production of income with a fair market value exceeding $1,000 at the end of the reporting year, and (b) any other asset or source of income which generated more than $200 in "unearned" income during the year. For rental property or land, provide an address. Provide full names of any mutual funds. For an IRA or retirement plan that is *self-directed*, list the underlying assets worth more than $1,000. For an IRA or retirement plan that is not selfdirected, name the institution holding the account.

Exclude: Your personal residence(s) (unless there is rental income); any debt owed to you by your spouse, or by your or your spouse's child, parent, or sibling; any deposits totalling $5,000 or less in personal savings accounts; any financial interests in or income derived from U.S. Government retirement programs.

If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC) or is jointly held (JT), in the optional column on the far left.

BLOCK B — Value of Asset

at close of reporting year. If you use a valuation method other than fair market value, please specify the method used. If an asset was sold and is included only because it generated income, the value should be "None."

BLOCK C — Type of Income

BLOCK D — Amount of Income

For IRA's and retirement plans that are *not* self-directed, you may write in "NA" for income.

BLOCK E — Transaction

Indicate if asset was purchased (P), sold (S), or exchanged (E) in reporting year

	BLOCK A		BLOCK B												BLOCK C							BLOCK D										BLOCK E
			A None	B $1 – $1,000	C $1,001 – $15,000	E $15,001 – $50,000	F $50,001 – $100,000	G $100,001 – $250,000	H $250,001 – $500,000	I $500,001 – $1,000,000	J $1,000,001 – $5,000,000	K $5,000,001 – $25,000,000	L $25,000,001 – $50,000,000	Over $50,000,000	DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Type of Income (Specify. For Example: Partnership Income or Farm Income)	I None	II $1 – $200	III $201 – $1,000	IV $1,001 – $2,500	V $2,501 – $5,000	VI $5,001 – $15,000	VII $15,001 – $50,000	VIII $50,001 – $100,000	IX $100,001 – $1,000,000	X $1,000,001 – $5,000,000	XI Over $5,000,000	P, S, E
SP		SP	Mega Corp Stock				X								X																P
DC	*Examples:*		Simon & Schuster			Indefinite															Royalties										
JT			1st Bank of Paducah, KY accounts					X									X										X					
	CUMMINS ENGINE COMPANY				X										X								X								

For additional assets and unearned income, use next page.

JULIA CARSON
10th District, Indiana

COMMITTEE ON
BANKING AND FINANCIAL
SERVICES
Subcommittee on Housing and
Community Opportunity

COMMITTEE ON
VETERANS' AFFAIRS
Subcommittee on Health

Internet:
http://www.house.gov/carson

HAND DELIVERED

Congress of the United States
House of Representatives
Washington, DC 20515–1410

WASHINGTON OFFICE
1541 Longworth Building
Washington, DC 20515
(202) 225–4011
(202) 225–5633 Fax

DISTRICT OFFICE
300 E. Fall Creek Pkwy N. Dr.
Suite 201
Indianapolis, IN 46205
(317) 283–6516
(317) 283–6567 Fax

E-Mail:
rep.carson@mail.house.gov

'97

June 9, 1998

RECEIVED
98 JUN 10 PM 1:31
U.S. HOUSE OF REPRESENTATIVES
OFFICE OF THE CLERK

(2)

MC

Hon. Robin H. Carle
Clerk of the House of Representatives
H-154, The Capitol
Washington, DC 20515

Dear Ms. Carle:

In reviewing my 1996 Financial Disclosure Statement, it has come to my attention that the Statement did not report my stock holdings in Cummins Engine Company, an asset valued at $1,000 - $15,000, with a dividend income of $1 - $200.

Enclosed is Schedule III - Assets and "Unearned" Income, which should be attached to my original submission.

I regret the inadvertent exclusion of this information. Please call me if I can answer any questions which you might have.

Sincerely,

Julia M. Carson

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98 JUN 10 AM 8:56

PRINTED ON RECYCLED PAPER

Name HON. JULIA CARSON | Page 3 of 3

SCHEDULE III — ASSETS AND "UNEARNED" INCOME

BLOCK A — Asset and/or Income Source

Identify (a) each asset held for investment or production of income with a fair market value exceeding $1,000 at the end of the reporting year, and (b) any other asset or source of income which generated more than $200 in "unearned" income during the year. For rental property or land, provide an address. Provide full names of any mutual funds. For an IRA or retirement plan that is *self-directed*, list the underlying assets worth more than $1,000. For an IRA or retirement plan that is not self-directed, name the institution holding the account.

Exclude: Your personal residence(s) (unless there is rental income); any debt owed to you by your spouse, or by your or your spouse's child, parent, or sibling; any deposits totalling $5,000 or less in personal savings accounts; any financial interests in or income derived from U.S. Government retirement programs.

If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC) or is jointly held (JT), in the optional column on the far left.

BLOCK B — Value of Asset

at close of reporting year. If you use a valuation method other than fair market value, please specify the method used. If an asset was sold and is included only because it generated income, the value should be "None."

BLOCK C — Type of Income

BLOCK D — Amount of Income

For IRA's and retirement plans that are *not* self-directed, you may write in "NA" for income.

BLOCK E — Transaction

Indicate if asset was purchased (P), sold (S), or exchanged (E) in reporting year.

	BLOCK A		BLOCK B													BLOCK C							BLOCK D										BLOCK E
			A None	B $1 – $1,000	C $1,001 – $15,000		E $15,001 – $50,000	F $50,001 – $100,000	G $100,001 – $250,000	H $250,001 – $500,000	I $500,001 – $1,000,000	J $1,000,001 – $5,000,000	K $5,000,001 – $25,000,000	L $25,000,001 – $50,000,000	Over $50,000,000	DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Type of Income (Specify: For Example, Partnership Income or Farm Income)	I None	II $1 – $200	III $201 – $1,000	IV $1,001 – $2,500	V $2,501 – $5,000	VI $5,001 – $15,000	VII $15,001 – $50,000	VIII $50,001 – $100,000	IX $100,001 – $1,000,000	X $1,000,001 – $5,000,000	XI Over $5,000,000	P, S, E
SP, DC, JT	*Examples:*	SP	Mega Corp. Stock					X								X																		P
			Simon & Schuster			Indefinite																Royalties									X			
			1st Bank of Paducah, KY account						X									X										X						
	CUMMINS ENGINE COMPANY				X											X							X										

For additional assets and unearned income, use next page.

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1997

FORM A
For use by Members, officers, and employees

98 MAY 15 PM 3:51

STEVEN J. CHABOT
(Full Name)

3014 HARRISON AVE.
(Mailing Address)

CINCINNATI OHIO 45211

(513) 661-8000
Daytime Telephone

(10)

HAND DELIVERED
(Office Use Only)

Filer Status: [X] Member of the U.S. House of Representatives — State OHIO District FIRST; [ ] Officer or Employee — Employing Office

Report Type: [X] Annual (May 15); [ ] Amendment; [ ] Termination — Termination Date

A *$200 penalty* shall be assessed against anyone who files more than 30 days late.

PRELIMINARY INFORMATION — ANSWER EACH OF THESE QUESTIONS

I. Did you or your spouse have "earned" income (e.g., salaries or fees) of $200 or more from any source in the reporting period? **If yes, complete and attach Schedule I.** Yes [X] No [ ]

II. Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? **If yes, complete and attach Schedule II.** Yes [ ] No [X]

III. Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? **If yes, complete and attach Schedule III.** Yes [X] No [ ]

IV. Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset worth more than $1,000 in the reporting period? **If yes, complete and attach Schedule IV.** Yes [X] No [ ]

V. Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? **If yes, complete and attach Schedule V.** Yes [ ] No [X]

VI. Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $250 and not otherwise exempt)? **If yes, complete and attach Schedule VI.** Yes [ ] No [X]

VII. Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $250 from one source)? **If yes, complete and attach Schedule VII** Yes [ ] No [X]

VIII. Did you hold any reportable positions on or before the date of filing in the current calendar year? **If yes, complete and attach Schedule VIII** Yes [ ] No [ ]

IX. Did you have any reportable agreement or arrangement with an outside entity? **If yes, complete and attach Schedule IX** Yes [X] No [ ]

Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION — ANSWER EACH OF THESE QUESTIONS

TRUSTS—Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child? Yes [ ] No [X]

EXEMPTION—Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption? Yes [ ] No [X]

CERTIFICATION — THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended. The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct or its designee. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil penalties and criminal sanctions (*See* 5 U.S.C. app. 4, §104 and 18 U.S.C. §1001).

SIGNATURE OF REPORTING INDIVIDUAL Steve Chabot

DATE (Month/Day/Year) 5/14/98

SCHEDULE I — EARNED INCOME

List the source, type, and amount of earned income from any source (other than the filer's current employment by the U.S. Government) totalling $200 or more during the preceding calendar year. For a spouse, list the source and amount of any honoraria; list only the source for other spouse earned income exceeding $1,000.

	Source	Type	Amount
Examples	Keene State	Approved Teaching Fee	$6,000
	State of Maryland	Legislative Pension	$9,000
	Civil War Roundtable (Oct. 2nd)	Spouse Speech	$1,000
	Ontario County Board of Education	Spouse Salary	NA
	PRIVATE LAW PRACTICE (CLOSED PRACTICE 12/31/94, FEES LISTED ARE FOR LEGAL WORK PRIOR TO 12/31/94)		200.00

For payments to charity in lieu of honoraria, use Schedule II.

SCHEDULE II — PAYMENTS IN LIEU OF HONORARIA MADE TO CHARITY

List the source, activity (i.e., speech, appearance, or article), date, and amount of any payment made by the sponsor of an event to a charitable organization in lieu of an honorarium. A separate confidential list of charities receiving such payments must be filed directly with the Committee on Standards of Official Conduct. An envelope for transmitting the list is included in each Member's filing package.

Source	Activity	Date	Amount
Examples Association of American Associations, Wash., D.C.	Speech	Feb. 2, 1997	$2,000
XYZ Magazine	Article	Aug. 13, 1997	$500
NONE			

This page may be copied if more space is required.

Name STEVEN J CHABOT | Page 4 of 10

SCHEDULE III — ASSETS AND "UNEARNED" INCOME

BLOCK A

Asset and/or Income Source

Identify (a) each asset held for investment or production of income with a fair market value exceeding $1,000 at the end of the reporting year and (b) any other asset or source of income which generated more than $200 in "unearned" income during the year. For rental property or land, provide an address. Provide full names of any mutual funds. For an IRA or retirement plan that is *self directed*, list the underlying assets worth more than $1,000. For an IRA or retirement plan that is not selfdirected, name the institution holding the account.

Exclude: Your personal residence(s) (unless there is rental income), any debt owed to you by your spouse, or by your or your spouse's child, parent, or sibling, any deposits totalling $5,000 or less in personal savings accounts, any financial interests in or income derived from U S Government retirement programs.

If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC) or is jointly held (JT), in the optional column on the far left.

BLOCK B

Value of Asset

at close of reporting year. If you use a valuation method other than fair market value, please specify the method used. If an asset was sold and is included only because it generated income, the value should be "None."

BLOCK C

Type of Income

BLOCK D

Amount of Income

For IRA's and retirement plans that are *not* self directed, you may write in "NA" for income

BLOCK E

Transaction

Indicate if asset was purchased (P), sold (S), or exchanged (E) in reporting year

Block A: Asset and/or Income Source	B-A: None	B-B: $1 – $1,000	B-C: $1,001 – $15,000	B-D: $15,001 – $50,000	B-E: $50,001 – $100,000	B-F: $100,001 – $250,000	B-G: $250,001 – $500,000	B-H: $500,001 – $1,000,000	B-I: $1,000,001 – $5,000,000	B-J: $5,000,001 – $25,000,000	B-K: $25,000,001 – $50,000,000	B-L: Over $50,000,000	C: DIVIDENDS	C: RENT	C: INTEREST	C: CAPITAL GAINS	C: EXCEPTED TRUST	C: QUALIFIED BLIND TRUST	C: Other Type of Income (Specify: For Example Partnership Income or Farm Income)	D-I: None	D-II: $1 – $200	D-III: $201 – $1,000	D-IV: $1,001 – $2,500	D-V: $2,501 – $5,000	D-VI: $5,001 – $15,000	D-VII: $15,001 – $50,000	D-VIII: $50,001 – $100,000	D-IX: $100,001 – $1,000,000	D-X: $1,000,001 – $5,000,000	D-XI: Over $5,000,000	Block E: Transaction (P, S, E)
Examples: SP Mega Corp. Stock					X								X										X								P
Examples: DC Simon & Schuster		Indefinite																	Royalties									X			
Examples: JT 1st Bank of Paducah KY accounts						X									X										X						
CGM MUTUAL FUND			X										X			X							X								
EVERGREEN MUTUAL FD.			X										X			X							X								
INVESCO MUTUAL FUND			X										X			X							X								
FOUNDERS BLUE CHIP FUND			X										X			X							X								
IVY INTERNATIONAL FUND			X										X			X					X										
JANUS MUTUAL FUND			X										X			X							X								

For additional assets and unearned income, use next page

SCHEDULE III — ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Name STEVEN J CHARROT | Page 5 of 10

BLOCK A Asset and/or Income Source	BLOCK B Year-End Value of Asset											BLOCK C Type of Income						BLOCK D Amount of Income									BLOCK E Transaction
SP DC. JT	A None	B $1 – $1,000	C $1 001 – $15 000	D $15 001 – $50 000	E $50 001 – $100 000	F $100 001 – $250 000	G $250 001 – $500 000	H $500 001 – $1 000 000	I $1 000 001 – $5 000 000	J $5 000 001 – $25 000 000	K $25 000 001 – $50 000 000	L Over $50 000 000	DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Type of Income (Specify)	I None	II $1 – $200	III $201 – $1 000	IV $1 001 – $2 500	V $2 501 – $5 000	VI $5 001 – $15 000	VII $15 001 – $50 000	VIII $50 001 – $100 000	IX $100 001 – $1 000 000	X $1 000 001 – $5 000 000	XI Over $5 000 000	P S E
NEUBERGER + BERMAN GUARDIAN FUND		X											X		X							X							
SAFECO INCOME MUTUAL FD.		X											X		X							X							
SOLOMAN BROS. OPP. FUND		X											X		X								X						
SELECTED AMERICAN SHARES FUND		X											X		X						X								
STEINROE SPECIAL MUT. FD.		X											X		X							X							
20th CENTURY (AMERICAN CENT.) MUT. FUND		X											X		X							X							
T. ROWE PRICE MUTUAL FD.		X											X		X						X								
VANGUARD WELLINGTON FUND		X											X		X						X								
JAI MUTUAL FUND		X											X		X						X								
LEGG MASON MUTUAL FUND		X											X		X						X								
LOOMIS SAYLES BOND FUND		X											X		X						X								
MONTGOMERY EMERGING FUND		X											X		X						X								
NICHOLAS II MUTUAL FUND		X											X		X							X							
PENNSYLVANIA (ROYCE) FUND		X											X		X							X							
WARBURG PINCUS MUTUAL FD.		X											X		X						X								
CHARLES SCHWAB & CO	X												X								X								
GRADISON MONEY MARKET FD.					X								X								X					#1			
PNC BANK ACCTS.				X											X						X								
CHEVIOT B+L CD'S			X												X							X							
5/3 BANK CD		X													X						X								
WESTWOOD HOMESTEAD CD'S					X										X							X							
STAR BANK CHECKING ACCTS.		X													X					X									

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SCHEDULE III — ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Name STEVEN J CHABOT | Page 6 of 10

BLOCK A Asset and/or Income Source SP. OC. JT	BLOCK B Year-End Value of Asset A None	B $1 – $1,000	C $1,001 – $15,000	D $15,001 – $50,000	E $50,001 – $100,000	F $100,001 – $250,000	G $250,001 – $500,000	H $500,001 – $1,000,000	I $1,000,001 – $5,000,000	J $5,000,001 – $25,000,000	K $25,000,001 – $50,000,000	L Over $50,000,000	BLOCK C Type of Income DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Type of Income (Specify)	BLOCK D Amount of Income I None	II $1 – $200	III $201 – $1,000	IV $1,001 – $2,500	V $2,501 – $5,000	VI $5,001 – $15,000	VII $15,001 – $50,000	VIII $50,001 – $100,000	IX $100,001 – $1,000,000	X $1,000,001 – $5,000,000	XI Over $5,000,000	BLOCK E Transaction P S E
BERGER 100 FUND IRA			X										X		X							X									
GATEWAY INDEX PLUS FD. IRA				X									X		X							X									
KAUFMAN FUND IRA			X										X		X							X									
COLUMBIA SPECIAL FUND IRA				X									X		X							X									
OHIO PUBLIC EMPLOYEES DEFF COMP					X								X												X						
OHIO PERS				X									X							X											
APPLEBEES COMMON STOCK			X										X								X									
CINTAS " "			X										X								X									
COCA COLA " "			X										X								X									
CRACKER BARREL " "			X										X								X									
PEPSICO " "			X										X								X									
TRICON " "		X											X								X									
VIACOM " "			X										X		X						X									
DISNEY " "			X										X								X									
WENDY'S " "			X										X								X									
SARA LEE " "			X										X								X									
INTERSTATE BAKERIES " "			X										X								X									

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SCHEDULE IV — TRANSACTIONS

Name STEVEN J CHABOT | Page 7 of 10

Report any purchase, sale, or exchange by you, your spouse, or dependent child during the reporting year of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child, or the purchase or sale of your personal residence, unless it is rented out

SP, DC, JT	Asset	Type of Transaction: PURCHASE	SALE	EXCHANGE	Date (MO/DAY/YR)	Amount of Transaction: B ($1,001–$15,000)	C ($15,001–$50,000)	D ($50,001–$100,000)	E ($100,001–$250,000)	F ($250,001–$500,000)	G ($500,001–$1,000,000)	H ($1,000,001–$5,000,000)	I ($5,000,001–$25,000,000)	J ($25,000,001–$50,000,000)	K (Over $50,000,000)
SP	*Example* Mega Corporation Common Stock	X			10-12-97		X								
	EVERGREEN MUTUAL FUND		X		11/11/97	X									
	INVESCO " "		X		11/11/97	X									
	IAI " "		X		11/14/97	X									
	SOLOMAN BROS " "		X		11/14/97	X									
	SAFECO " "		X		11/14/97	X									
	VIACOM (100 COMMON SHARES)		X		2/10/97	X									
	STEINROE MUTUAL FUND		X		11/11/97	X									
	PENNSYLVANIA (ROYCE) MUTUAL FUND		X		11/11/97	X									

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SCHEDULE V — LIABILITIES

Report liabilities of over $10,000 owed to any one creditor ***at any time*** during the reporting period by you, your spouse, or dependent child. Mark the highest amount owed during the year. **Exclude:** Any mortgage on your personal residence (unless it is rented out), loans secured by automobiles, household furniture, or appliances, and liabilities owed to a spouse, or the child, parent, or sibling of you or your spouse. Report ***revolving charge accounts*** only if the balance at the end of the reporting period exceeded $10,000.

SP, DC, JT	Creditor	Type of Liability	Amount of Liability									
			B $10,001 – $15,000	C $15,001 – $50,000	D $50,001 – $100,000	E $100,001 – $250,000	F $250,001 – $500,000	G $500,001 – $1,000,000	H $1,000,001 – $5,000,000	I $5,000,001 – $25,000,000	J $25,000,001 – $50,000,000	K Over $50,000,000
Example	First Bank of Wilmington, Delaware	Mortgage on 123 Main St., Dover, Del				X						
	NONE											

SCHEDULE VI — GIFTS

Report the source, a brief description, and the value of all gifts totalling more than $250 received by you, your spouse, or a dependent child from any source during the year.

Exclude: Gifts from relatives, gifts of personal hospitality of an individual, local meals, and gifts to a spouse or dependent child that are totally independent of his or her relationship to you. Gifts with a value of $100 or less need not be added towards the $250 disclosure threshold.

Note: The gift rule (House Rule 51) prohibits gifts except as specifically provided in the rule.

Source	Description	Value
Example Mr. Joseph H. Smith, Anytown, Anystate	Silver Platter (determination on personal friendship received from Committee on Standards)	$270
NONE		

Use additional sheets if more space is required.

Name STEVEN J CHABOT | Page 9 of 10

SCHEDULE VII —TRAVEL PAYMENTS AND REIMBURSEMENTS

Identify the source and list travel itinerary, dates, and nature of expenses provided for travel and travel-related expenses totalling more than $250 received by you, your spouse, or a dependent child during the reporting period. Indicate whether a family member accompanied the traveler at the sponsor's expense, and the amount of time, if any, that was not at the sponsor's expense. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor.

Exclude: Travel-related expenses provided by federal, state, and local governments, or by a foreign government required to be separately reported under the Foreign Gifts and Decorations Act (5 U.S.C. § 7342); travel paid for by a Federal political committee; travel provided to a spouse or dependent child that is totally independent of his or her relationship to you.

Source	Date(s)	Point of Departure—Destination—Point of Return	Lodging? (Y/N)	Food? (Y/N)	Was a Family Member Included? (Y/N)	Any time not at sponsor's expense
Examples: Chicago Chamber of Commerce	Mar. 2	Wash., D.C.—Chicago—Wash., D.C.	N	N	N	N
Roycroft Corporation	Aug. 6–13	Wash., D.C.—Los Angeles—Cleveland	Y	Y	Y	4 Days
NONE						

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SCHEDULE VIII — POSITIONS

Report all positions, compensated or uncompensated, held during the current calendar year as an officer, director, trustee of an organization, partner, proprietor, representative, employee, or consultant of any corporation, firm, partnership, or other business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States.

Exclude: Positions held in any religious, social, fraternal, or political entities; positions solely of an honorary nature; and positions listed on Schedule I

Position	Name of Organization
SOLE PRACTITIONER (RETIRED)	STEVEN J CHABOT ATTORNEY AT LAW (CLOSED LAW PRACTICE 12/31/94, RECEIVED FEES FROM CASES HANDLED BEFORE 12/31/94.

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SCHEDULE IX — AGREEMENTS

Identify the date, parties to, and general terms of any agreement or arrangement with respect to: future employment; a leave of absence during the period of government service; continuation or deferral of payments by a former or current employer other than the U.S. Government; or continuing participation in an employee welfare or benefit plan maintained by a former employer.

Date	Parties To	Terms of Agreement
DEC 85-94 PAID INTO	OHIO PUBLIC EMPLOYEES RETIREMENT SYSTEM (PERS	UPON RETIREMENT
MAY '90 - DEC 94 PAID INTO	OHIO PUBLIC EMPLOYEES DEFERRED COMP.	AT AGE 55
	PURSUANT TO THE AGREEMENT DESCRIBED IN THE FINANCIAL DISCLOSURE	
	STATEMENT FILED IN MAY OF	1995, I AM TO RECEIVE COMPENSATION
	FOR LEGAL WORK DONE PRIOR TO	12/31/94, MOST OF WHICH HAS NOW
	BEEN RECEIVED).	

GPO: 1998 46-260 (mac)

Use additional sheets if more space is required.

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1997

FORM A
For use by Members, officers, and employees

RECEIVED
98 MAY 14 PM 4:53

SAXBY CHAMBLISS
(Full Name)

1019 LONGWORTH
(Mailing Address)

WASHINGTON DC 20515

Daytime Telephone 202/225-6531

MP (Office Use Only)

6

Filer Status: [X] Member of the U.S. House of Representatives — State GA, District 8 — [ ] Officer or Employee — Employing Office

Report Type: [ ] Annual (May 15) — [ ] Amendment — [ ] Termination — Termination Date

A *$200 penalty* shall be assessed against anyone who files more than 30 days late.

PRELIMINARY INFORMATION — ANSWER EACH OF THESE QUESTIONS

I Did you or your spouse have "earned" income (e.g., salaries or fees) of $200 or more from any source in the reporting period? **If yes, complete and attach Schedule I.**	Yes [X] No [ ]	VI Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $250 and not otherwise exempt)? **If yes, complete and attach Schedule VI.**	Yes [ ] No [X]
II. Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? **If yes, complete and attach Schedule II.**	Yes [ ] No [X]	VII Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $250 from one source)? **If yes, complete and attach Schedule VII.**	Yes [X] No [ ]
III Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? **If yes, complete and attach Schedule III.**	Yes [X] No [ ]	VIII Did you hold any reportable positions on or before the date of filing in the current calendar year? **If yes, complete and attach Schedule VIII.**	Yes [X] No [ ]
IV Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset worth more than $1,000 in the reporting period? **If yes, complete and attach Schedule IV.**	Yes [ ] No [X]	IX Did you have any reportable agreement or arrangement with an outside entity? **If yes, complete and attach Schedule IX.**	Yes [ ] No [X]
V Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? **If yes, complete and attach Schedule V.**	Yes [X] No [ ]	Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.	

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION — ANSWER EACH OF THESE QUESTIONS

TRUSTS—Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child?	Yes [ ] No [X]
EXEMPTION—Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption?	Yes [ ] No [X]

CERTIFICATION — THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended. The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct or its designee. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil penalties and criminal sanctions (*See* 5 U.S.C. app. 4, §104 and 18 U.S.C. §1001)

SIGNATURE OF REPORTING INDIVIDUAL: Saxby Chambliss

DATE (Month/Day/Year): 5/14/98

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Name	Page __ of

SCHEDULE I — EARNED INCOME

List the source, type, and amount of earned income from any source (other than the filer's current employment by the U.S. Government) totalling $200 or more during the preceding calendar year. For a spouse, list the source and amount of any honoraria; list only the source for other spouse earned income exceeding $1,000.

	Source	Type	Amount
Examples	Keene State	Approved Teaching Fee	$6,000
	State of Maryland	Legislative Pension	$9,000
	Civil War Roundtable (Oct. 2nd)	Spouse Speech	$1,000
	Ontario County Board of Education	Spouse Salary	NA
	Colquitt Co. Bd of Education	Spouse Salary	N/A

For payments to charity in lieu of honoraria, use Schedule II.

Name | Page of

SCHEDULE III — ASSETS AND "UNEARNED" INCOME

BLOCK A — Asset and/or Income Source

Identify (a) each asset held for investment or production of income with a fair market value exceeding $1,000 at the end of the reporting year, and (b) any other asset or source of income which generated more than $200 in "unearned" income during the year. For rental property or land, provide an address. Provide full names of any mutual funds. For an IRA or retirement plan that is *self-directed*, list the underlying assets worth more than $1,000. For an IRA or retirement plan that is not self-directed, name the institution holding the account.

Exclude: Your personal residence(s) (unless there is rental income), any debt owed to you by your spouse, or by your or your spouse's child, parent, or sibling, any deposits totalling $5,000 or less in personal savings accounts, any financial interests in or income derived from U.S. Government retirement programs.

If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC) or is jointly held (JT), in the optional column on the far left.

BLOCK B — Value of Asset

at close of reporting year

If you use a valuation method other than fair market value, please specify the method used. If an asset was sold and is included only because it generated income, the value should be "None."

BLOCK C — Type of Income

BLOCK D — Amount of Income

For IRA's and retirement plans that are *not* self-directed, you may write in "NA" for income.

BLOCK E — Transaction

Indicate if asset was purchased (P), sold (S), or exchanged (E) in reporting year

				Block B: Value of Asset												Block C: Type of Income								Block D: Amount of Income											Block E: Transaction
				A None	B $1 – $1,000	C $1,001 – $15,000	$15,001 – $50,000	E $50,001 – $100,000	F $100,001 – $250,000	G $250,001 – $500,000	H $500,001 – $1,000,000	I $1,000,001 – $5,000,000	J $5,000,001 – $25,000,000	K $25,000,001 – $50,000,000	L Over $50,000,000	DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Type of Income (Specify - For Example, Partnership Income or Farm Income)	I None	II $1 – $200	III $201 – $1,000	IV $1,001 – $2,500	V $2,501 – $5,000	VI $5,001 – $15,000	VII $15,001 – $50,000	VIII $50,001 – $100,000	IX $100,001 – $1,000,000	X $1,000,001 – $5,000,000	XI Over $5,000,000	P, S, E
SP, DC, JT	*Examples*	SP	Mega Corp. Stock					X								X											X								P
			Simon & Schuster			Indefinite																Royalties													
			1st Bank of Paducah, KY accounts						X								X										X								
			Southwest GA Fin. Corp				X									X									X										
			Kendallwood Crossing (RE)			X													X																
			APEECC Corp. Stock (S)			X																													
			Cong. Fed. Credit Union			X												X						X											

For additional assets and unearned income, use next page.

Name	Page ___ of ___

SCHEDULE V — LIABILITIES

Report liabilities of over $10,000 owed to any one creditor ***at any time*** during the reporting period by you, your spouse, or dependent child. Mark the highest amount owed during the year. **Exclude:** Any mortgage on your personal residence (unless it is rented out); loans secured by automobiles, household furniture, or appliances, and liabilities owed to a spouse, or the child, parent, or sibling of you or your spouse. Report ***revolving charge accounts*** only if the balance at the end of the reporting period exceeded $10,000!

SP, DC, JT	Creditor	Type of Liability	Amount of Liability									
			B $10,001–$15,000	C $15,001–$50,000	D $50,001–$100,000	E $100,001–$250,000	F $250,001–$500,000	G $500,001–$1,000,000	H $1,000,001–$5,000,000	I $5,000,001–$25,000,000	J $25,000,001–$50,000,000	K Over $50,000,000
	Example. First Bank of Wilmington, Delaware	Mortgage on 123 Main St., Dover, Del.				X						
	American Bkg. Co. GA	unsecured consumer loan		X								

SCHEDULE VI — GIFTS

Report the source, a brief description, and the value of all gifts totalling more than $250 received by you, your spouse, or a dependent child from any source during the year.

Exclude: Gifts from relatives, gifts of personal hospitality of an individual, local meals, and gifts to a spouse or dependent child that are totally independent of his or her relationship to you. Gifts with a value of $100 or less need not be added towards the $250 disclosure threshold.

Note: The gift rule (House Rule 51) prohibits gifts except as specifically provided in the rule.

Source	Description	Value
Example Mr. Joseph H. Smith, Anytown, Anystate	Silver Platter (determination on personal friendship received from Committee on Standards)	$270

Use additional sheets if more space is required.

Name	Page of

SCHEDULE VII —TRAVEL PAYMENTS AND REIMBURSEMENTS

Identify the source and list travel itinerary, dates, and nature of expenses provided for travel and travel-related expenses totalling more than $250 received by you, your spouse, or a dependent child during the reporting period. Indicate whether a family member accompanied the traveler at the sponsor's expense, and the amount of time, if any, that was not at the sponsor's expense. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor.

Exclude: Travel-related expenses provided by federal, state, and local governments, or by a foreign government required to be separately reported under the Foreign Gifts and Decorations Act (5 U.S.C. § 7342); travel paid for by a Federal political committee; travel provided to a spouse or dependent child that is totally independent of his or her relationship to you.

	Source	Date(s)	Point of Departure—Destination—Point of Return	Lodging? (Y/N)	Food? (Y/N)	Was a Family Member Included? (Y/N)	Any time not at sponsor's expense
Examples:	Chicago Chamber of Commerce	Mar 2	Wash., D C —Chicago—Wash., D C	N	N	N	N
	Roycroft Corporation	Aug 6–13	Wash., D C —Los Angeles—Cleveland	Y	Y	Y	4 Days
	Aspen Inst. (Bipartisan Retreat)	3/7-9	DC - Hershey PA - DC	Y	Y	Y	N
	Wine & Spirits Wholesalers of GA	6/26-28	DC - St. Simons Is. GA - ATL	Y	Y	Y	N
	GA Dental Assoc.	8/13-16	GA - Orange Beach FL - GA	Y	Y	Y	N

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Name	Page ___ of ___

SCHEDULE VIII — POSITIONS

Report all positions, compensated or uncompensated, held during the current calendar year as an officer, director, trustee of an organization, partner, proprietor, representative, employee, or consultant of any corporation, firm, partnership, or other business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States.

Exclude: Positions held in any religious, social, fraternal, or political entities; positions solely of an honorary nature; and positions listed on Schedule I.

Position	Name of Organization
DIRECTOR/OFFICER	APEEC Corp. (Sub. S)

SCHEDULE IX — AGREEMENTS

Identify the date, parties to, and general terms of any agreement or arrangement with respect to: future employment; a leave of absence during the period of government service; continuation or deferral of payments by a former or current employer other than the U.S. Government; or continuing participation in an employee welfare or benefit plan maintained by a former employer.

Date	Parties To	Terms of Agreement

-260 (mac)

Use additional sheets if more space is required.

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1997

FORM A
For use by Members, officers, and employees

RECEIVED
98 MAY 14 PM 3:51
OFFICE OF THE CLERK
U.S. HOUSE OF REPRESENTATIVES

HELEN P. CHENOWETH
(Full Name)

1719 LONGWORTH HOB
(Mailing Address)

WASHINGTON DC 20515

(202) 225-6611
Daytime Telephone

HC HAND DELIVERED (5)
(Office Use Only)

Filer Status	[X]	Member of the U.S. House of Representatives	State IDAHO District 1	[ ] Officer or Employee	Employing Office
Report Type	[X]	Annual (May 15)	[ ] Amendment	[ ] Termination	Termination Date

A *$200 penalty* shall be assessed against anyone who files more than 30 days late.

PRELIMINARY INFORMATION — ANSWER EACH OF THESE QUESTIONS

I Did you or your spouse have "earned" income (e.g., salaries or fees) of $200 or more from any source in the reporting period?
If yes, complete and attach Schedule I. Yes [ ] No [X]

II Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period?
If yes, complete and attach Schedule II. Yes [ ] No [X]

III Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period?
If yes, complete and attach Schedule III. Yes [X] No [ ]

IV Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset worth more than $1,000 in the reporting period?
If yes, complete and attach Schedule IV. Yes [ ] No [X]

V Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period?
If yes, complete and attach Schedule V. Yes [X] No [ ]

VI Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $250 and not otherwise exempt)?
If yes, complete and attach Schedule VI. Yes [ ] No [X]

VII Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $250 from one source)?
If yes, complete and attach Schedule VII. Yes [ ] No [X]

VIII Did you hold any reportable positions on or before the date of filing in the current calendar year?
If yes, complete and attach Schedule VIII. Yes [X] No [ ]

IX Did you have any reportable agreement or arrangement with an outside entity?
If yes, complete and attach Schedule IX. Yes [ ] No [X]

Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION — ANSWER EACH OF THESE QUESTIONS

TRUSTS—Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child? Yes [ ] No [X]

EXEMPTION—Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption? Yes [ ] No [X]

CERTIFICATION — THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended. The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct or its designee. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil penalties and criminal sanctions (*See* 5 U.S.C. app. 4, §104 and 18 U.S.C. §1001).

SIGNATURE OF REPORTING INDIVIDUAL Helen Chenoweth, M.C.

DATE (Month/Day/Year) May 14, 1998

SCHEDULE III — ASSETS AND "UNEARNED" INCOME

Name HELEN P. CHENOWETH | Page 2 of 5

BLOCK A — Asset and/or Income Source

Identify (a) each asset held for investment or production of income with a fair market value exceeding $1,000 at the end of the reporting year, and (b) any other asset or source of income which generated more than $200 in "unearned" income during the year. For rental property or land, provide an address. Provide full names of any mutual funds. For an IRA or retirement plan that is *self-directed*, list the underlying assets worth more than $1,000. For an IRA or retirement plan that is not self-directed, name the institution holding the account.

Exclude: Your personal residence(s) (unless there is rental income), any debt owed to you by your spouse, or by your or your spouse's child, parent, or sibling, any deposits totalling $5,000 or less in personal savings accounts, any financial interests in or income derived from U.S. Government retirement programs.

If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC) or is jointly held (JT), in the optional column on the far left.

BLOCK B — Value of Asset

at close of reporting year. If you use a valuation method other than fair market value, please specify the method used. If an asset was sold and is included only because it generated income, the value should be "None."

BLOCK C — Type of Income

BLOCK D — Amount of Income

For IRA's and retirement plans that are *not* self-directed, you may write in "NA" for income.

BLOCK E — Transaction

Indicate if asset was purchased (P), sold (S), or exchanged (E) in reporting year.

	BLOCK A	BLOCK B												BLOCK C								BLOCK D											BLOCK E
		A None	B $1 – $1,000	C $1,001 – $15,000		E $15,001 – $50,000	F $50,001 – $100,000	G $100,001 – $250,000	H $250,001 – $500,000	I $500,001 – $1,000,000	J $1,000,001 – $5,000,000	K $5,000,001 – $25,000,000	L $25,000,001 – $50,000,000	Over $50,000,000	DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Type of Income (Specify. For Example: Partnership Income or Farm Income)	I None	II $1 – $200	III $201 – $1,000	IV $1,001 – $2,500	V $2,501 – $5,000	VI $5,001 – $15,000	VII $15,001 – $50,000	VIII $50,001 – $100,000	IX $100,001 – $1,000,000	X $1,000,001 – $5,000,000	XI Over $5,000,000	P, S, E
SP.					SP	Mega Corp. Stock									X																		P
DC.	*Examples*			Indefinite			X															Royalties											
JT						1st Bank of Paducah KY accounts		X									X										X							
	LAND, ROUTE 1 OROFINO, IDAHO				X																												
	CONGRESSIONAL FEDERAL CREDIT UNION						X										X							X									
	HOME VALLEY BANK		X														X						X									
	CONSULTING ASSOC., INC.														X	LIQUIDATING DIST.								X									
	BHC SECURITIES		X												X								X									
	RESIDENCE, MOUNT EAGLE DR ALEXANDRIA, VA (SHARED LIVING EXPENSE	X															X					X	REPORTED FOR CLARITY ONLY									

For additional assets and unearned income, use next page.

SCHEDULE III — ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Name HELEN P. CHENOWETH

SP DC JT	BLOCK A Asset and/or Income Source	BLOCK B Year-End Value of Asset												BLOCK C Type of Income							BLOCK D Amount of Income										BLOCK E Transaction
		A None	B $1 – $1,000	C $1,001 – $15,000	D $15,001 – $50,000	E $50,001 – $100,000	F $100,001 – $250,000	G $250,001 – $500,000	H $500,001 – $1,000,000	I $1,000,001 – $5,000,000	J $5,000,001 – $25,000,000	K $25,000,001 – $50,000,000	L Over $50,000,000	DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Type of Income (Specify)	I None	II $1 – $200	III $201 – $1,000	IV $1,001 – $2,500	V $2,501 – $5,000	VI $5,001 – $15,000	VII $15,001 – $50,000	VIII $50,001 – $100,000	IX $100,001 – $1,000,000	X $1,000,001 – $5,000,000	XI Over $5,000,000	P S E
	NOTE RECEIVABLE CHENOWETH FOR CONGRESS					X																									
	AMERICAN CHURCH TRUST CO. MONEY MARKET & NOTE 6/15/93			X												X							X								

This page may be copied if more space is required.

Name HELEN P. CHENOWETH | Page 4 of 5

SCHEDULE V — LIABILITIES

Report liabilities of over $10,000 owed to any one creditor ***at any time*** during the reporting period by you, your spouse, or dependent child. Mark the highest amount owed during the year. **Exclude:** Any mortgage on your personal residence (unless it is rented out); loans secured by automobiles, household furniture, or appliances; and liabilities owed to a spouse, or the child, parent, or sibling of you or your spouse. Report ***revolving charge accounts*** only if the balance at the end of the reporting period exceeded $10,000

SP, DC, JT	Creditor	Type of Liability	Amount of Liability										
			B $10,001 – $15,000	C $15,001 – $50,000	D $50,001 – $100,000	E $100,001 – $250,000	F $250,001 – $500,000	G $500,001 – $1,000,000	H $1,000,001 – $5,000,000	I $5,000,001 – $25,000,000	J $25,000,001 – $50,000,000	K Over $50,000,000
	Example First Bank of Wilmington, Delaware	Mortgage on 123 Main St., Dover, Del				X						
	VIRGINIA DINNISON, OROFINO, IDAHO	MORTGAGE ON LAND, ROUTE 1 OROFINO, IDAHO	X									
	JOE KRYGOSKI, MENOMINEE, MI	POERSONAL PROMISSORY NOTE			X							

SCHEDULE VI — GIFTS

Report the source, a brief description, and the value of all gifts totalling more than $250 received by you, your spouse, or a dependent child from any source during the year

Exclude: Gifts from relatives, gifts of personal hospitality of an individual, local meals, and gifts to a spouse or dependent child that are totally independent of his or her relationship to you. Gifts with a value of $100 or less need not be added towards the $250 disclosure threshold

Note: The gift rule (House Rule 51) prohibits gifts except as specifically provided in the rule.

Source	Description	Value
Example Mr. Joseph H. Smith, Anytown, Anystate	Silver Platter (determination on personal friendship received from Committee on Standards)	$270

Use additional sheets if more space is required.

SCHEDULE VIII — POSITIONS

Report all positions, compensated or uncompensated, held during the current calendar year as an officer, director, trustee of an organization, partner, proprietor, representative, employee, or consultant of any corporation, firm, partnership, or other business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States.

Exclude: Positions held in any religious, social, fraternal, or political entities; positions solely of an honorary nature; and positions listed on Schedule I

Position	Name of Organization
BOARD OF DIRECTOR (UNPA)	CENTER FOR THE STUDY OF MARKET ALTERNATIVES

SCHEDULE IX — AGREEMENTS

Identify the date, parties to, and general terms of any agreement or arrangement with respect to: future employment; a leave of absence during the period of government service; continuation or deferral of payments by a former or current employer other than the U.S. Government; or continuing participation in an employee welfare or benefit plan maintained by a former employer.

Date	Parties To	Terms of Agreement
	N/A	

GPO: 1998 46-260 (mac)

Use additional sheets if more space is required.

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1997

FORM A
For use by Members, officers, and employees

RECEIVED
98 MAY 19 AM 10:17
OFFICE OF THE CLERK
HOUSE OF REPRESENTATIVES

(4)

MAY 15 1998
(Office Use Only)

Jon Christensen
(Full Name)

P.O. Box 540621 Omaha, NE 68154
(Mailing Address)

402-397-9944
Daytime Telephone

Filer Status	[X] Member of the U.S. House of Representatives	State NE District 2nd	[ ] Officer or Employee	Employing Office	A *$200 penalty* shall be assessed against anyone who files more than 30 days late.
Report Type	[X] Annual (May 15)	[ ] Amendment	[ ] Termination	Termination Date	

PRELIMINARY INFORMATION — ANSWER EACH OF THESE QUESTIONS

I. Did you or your spouse have "earned" income (e.g., salaries or fees) of $200 or more from any source in the reporting period? **If yes, complete and attach Schedule I.** — Yes [ ] No [X]

II. Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? **If yes, complete and attach Schedule II.** — Yes [ ] No [X]

III. Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? **If yes, complete and attach Schedule III.** — Yes [X] No [ ]

IV. Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset worth more than $1,000 in the reporting period? **If yes, complete and attach Schedule IV.** — Yes [ ] No [X]

V. Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? **If yes, complete and attach Schedule V.** — Yes [X] No [ ]

VI. Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $250 and not otherwise exempt)? **If yes, complete and attach Schedule VI.** — Yes [ ] No [X]

VII. Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $250 from one source)? **If yes, complete and attach Schedule VII.** — Yes [X] No [ ]

VIII. Did you hold any reportable positions on or before the date of filing in the current calendar year? **If yes, complete and attach Schedule VIII.** — Yes [ ] No [X]

IX. Did you have any reportable agreement or arrangement with an outside entity? **If yes, complete and attach Schedule IX.** — Yes [ ] No [X]

Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION — ANSWER EACH OF THESE QUESTIONS

TRUSTS—Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child? — Yes [ ] No [X]

EXEMPTION—Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption? — Yes [ ] No [X]

CERTIFICATION — THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended. The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct or its designee. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil penalties and criminal sanctions (*See* 5 U.S.C. app. 4, §104 and 18 U.S.C. §1001)

SIGNATURE OF REPORTING INDIVIDUAL: Jon Christensen

DATE (Month/Day/Year): May 15, 1998

Name Jon Christensen | Page 2 of 4

SCHEDULE III — ASSETS AND "UNEARNED" INCOME

BLOCK A — Asset and/or Income Source

Identify (a) each asset held for investment or production of income with a fair market value exceeding $1,000 at the end of the reporting year, and (b) any other asset or source of income which generated more than $200 in "unearned" income during the year. For rental property or land, provide an address. Provide full names of any mutual funds. For an IRA or retirement plan that is *self-directed*, list the underlying assets worth more than $1,000. For an IRA or retirement plan that is not self-directed, name the institution holding the account.

Exclude: Your personal residence(s) (unless there is rental income); any debt owed to you by your spouse, or by your or your spouse's child, parent, or sibling; any deposits totalling $5,000 or less in personal savings accounts; any financial interests in or income derived from U.S. Government retirement programs.

If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC) or is jointly held (JT), in the optional column on the far left.

BLOCK B — Value of Asset

at close of reporting year. If you use a valuation method other than fair market value, please specify the method used. If an asset was sold and is included only because it generated income, the value should be "None."

BLOCK C — Type of Income

BLOCK D — Amount of Income

For IRA's and retirement plans that are *not* self-directed, you may write in "NA" for income.

BLOCK E — Transaction

Indicate if asset was purchased (P), sold (S), or exchanged (E) in reporting year.

	BLOCK A	BLOCK B												BLOCK C							BLOCK D										BLOCK E
		A None	B $1 – $1,000	C $1,001 – $15,000	$15,001 – $50,000	E $50,001 – $100,000	F $100,001 – $250,000	G $250,001 – $500,000	H $500,001 – $1,000,000	I $1,000,001 – $5,000,000	J $5,000,001 – $25,000,000	K $25,000,001 – $50,000,000	L Over $50,000,000	DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Type of Income (Specify. For Example, Partnership Income or Farm Income)	I None	II $1 – $200	III $201 – $1,000	IV $1,001 – $2,500	V $2,501 – $5,000	VI $5,001 – $15,000	VII $15,001 – $50,000	VIII $50,001 – $100,000	IX $100,001 – $1,000,000	X $1,000,001 – $5,000,000	XI Over $5,000,000	
SP DC JT	*Examples*		Indefinite			X	X							X		X				Royalties			X		X			X			P
	Aquila Group, Inc. - stock			X										X							X										
	Mass. Mutual IRA			X										X			X				X										
	Farm - St. Paul, NE						X								X										X						

For additional assets and unearned income, use next page

Name	Jon Christensen	Page 3 of 4

SCHEDULE V — LIABILITIES

Report liabilities of over $10,000 owed to any one creditor ***at any time*** during the reporting period by you, your spouse, or dependent child. Mark the highest amount owed during the year. **Exclude:** Any mortgage on your personal residence (unless it is rented out); loans secured by automobiles, household furniture, or appliances; and liabilities owed to a spouse, or the child, parent, or sibling of you or your spouse. Report ***revolving charge accounts*** only if the balance at the end of the reporting period exceeded $10,000.

SP, DC, JT	Creditor	Type of Liability	Amount of Liability									
			B $10,001 – $15,000	C $15,001 – $50,000	D $50,001 – $100,000	E $100,001 – $250,000	F $250,001 – $500,000	G $500,001 – $1,000,000	H $1,000,001 – $5,000,000	I $5,000,001 – $25,000,000	J $25,000,001 – $50,000,000	K Over $50,000,000
Example	First Bank of Wilmington, Delaware	Mortgage on 123 Main St., Dover, Del				X						
	Carlos, Morris, Houston, TX	Personal loan		X								
	"	"										
	"	"										

SCHEDULE VI — GIFTS

Report the source, a brief description, and the value of all gifts totalling more than $250 received by you, your spouse, or a dependent child from any source during the year.

Exclude: Gifts from relatives, gifts of personal hospitality of an individual, local meals, and gifts to a spouse or dependent child that are totally independent of his or her relationship to you. Gifts with a value of $100 or less need not be added towards the $250 disclosure threshold.

Note: The gift rule (House Rule 51) prohibits gifts except as specifically provided in the rule.

Source	Description	Value
Example Mr. Joseph H. Smith, Anytown, Anystate	Silver Platter (determination on personal friendship received from Committee on Standards)	$270

Use additional sheets if more space is required.

Name	Jon Christensen	Page 4 of 4

SCHEDULE VII —TRAVEL PAYMENTS AND REIMBURSEMENTS

Identify the source and list travel itinerary, dates, and nature of expenses provided for travel and travel-related expenses totalling more than $250 received by you, your spouse, or a dependent child during the reporting period. Indicate whether a family member accompanied the traveler at the sponsor's expense, and the amount of time, if any, that was not at the sponsor's expense. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor.

Exclude: Travel-related expenses provided by federal, state, and local governments, or by a foreign government required to be separately reported under the Foreign Gifts and Decorations Act (5 U.S.C. § 7342); travel paid for by a Federal political committee; travel provided to a spouse or dependent child that is totally independent of his or her relationship to you

Source	Date(s)	Point of Departure—Destination—Point of Return	Lodging? (Y/N)	Food? (Y/N)	Was a Family Member Included? (Y/N)	Any time not at sponsor's expense
Examples Chicago Chamber of Commerce	Mar 2	Wash., D.C.—Chicago—Wash., D.C.	N	N	N	N
Roycroft Corporation	Aug 6–13	Wash., D.C.—Los Angeles—Cleveland	Y	Y	Y	4 Days
American/Israel Public Affairs Committee	Jan 9 -17	Wash. DC - Jeruselem - Wash. DC	Y	Y	N	N

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UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1996

FORM A
For use by Members, officers, and employees

98 MAY 14 PM 3:02

(14)

HAND DELIVERED
(Office Use Only)

DONNA MARIE CHRISTIAN-GREEN
(Full Name)
1711 LONGWORTH H.O.B.
(Mailing Address)
WASHINGTON, DC
Daytime Telephone (202) 225-1790

Filer Status	☒ Member of the U.S. House of Representatives	State District	☐ Officer or Employee	Employing Office	**A *$200 penalty* shall be assessed against anyone who files more than 30 days late.**
Report Type	☒ Annual (May 15)	☐ Amendment	☐ Termination	Termination Date	

PRELIMINARY INFORMATION — ANSWER EACH OF THESE QUESTIONS

I. Did you or your spouse have "earned" income (e.g., salaries or fees) of $200 or more from any source in the reporting period? **If yes, complete and attach Schedule I.** — Yes ☒ No ☐

II. Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? **If yes, complete and attach Schedule II.** — Yes ☐ No ☒

III. Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? **If yes, complete and attach Schedule III.** — Yes ☐ No ☒

IV. Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset worth more than $1,000 in the reporting period? **If yes, complete and attach Schedule IV.** — Yes ☐ No ☒

V. Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? **If yes, complete and attach Schedule V.** — Yes ☒ No ☐

VI. Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $250 and not otherwise exempt)? **If yes, complete and attach Schedule VI** — Yes ☐ No ☒

VII. Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $250 from one source)? **If yes, complete and attach Schedule VII.** — Yes ☒ No ☐

VIII. Did you hold any reportable positions on or before the date of filing in the current calendar year? **If yes, complete and attach Schedule VIII.** — Yes ☒ No ☐

IX. Did you have any reportable agreement or arrangement with an outside entity? **If yes, complete and attach Schedule IX** — Yes ☐ No ☒

Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION — ANSWER EACH OF THESE QUESTIONS

TRUSTS— Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child? (See Instructions, pages 10–11.) — Yes ☐ No ☒

EXEMPTION— Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption? (See Instructions, page 11.) — Yes ☐ No ☒

CERTIFICATION — THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended. The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct or its designee. Any individual who knowingly and wilfully falsifies, or who knowingly and wilfully fails to file this report may be subject to civil penalties and criminal sanctions (*See* 5 U.S.C. app. 4, §104 and 18 U.S.C. §1001).

SIGNATURE OF REPORTING INDIVIDUAL — DATE (Month/Day/Year): 5-14-98

SCHEDULE I — EARNED INCOME

List the source, type, and amount of earned income from any source (other than the filer's current employment by the U.S Government) totalling $200 or more during the preceding calendar year. For a spouse, list the source and amount of any honoraria; list only the source for other spouse earned income exceeding $1,000. For further information, see Instructions, pages 12–13.

	Source	Type	Amount
Examples	Keene State	Approved Teaching Fee	$6,000
	State of Maryland	Legislative Pension	$9,000
	Civil War Roundtable (Oct 2nd)	Spouse Speech	$1,000
	Ontario County Board of Education	Spouse Salary	NA
	Virgin Islands Medical Institute	per-diem	$260

For payments to charity in lieu of honoraria, use Schedule II.

SCHEDULE II — PAYMENTS IN LIEU OF HONORARIA MADE TO CHARITY

List the source, activity (i.e., speech, appearance, or article), date, and amount of any payment made by the sponsor of an event to a charitable organization in lieu of an honorarium. A separate confidential list of charities receiving such payments must be filed directly with the Committee on Standards of Official Conduct. An envelope for transmitting the list is included in each Member's filing package. For further information, see Instructions, pages 13–14

Source	Activity	Date	Amount
Examples Association of American Associations, Wash., D.C.	Speech	Feb. 2, 1996	$2,000
XYZ Magazine	Article	Aug. 13, 1996	$500
NONE	—	—	—

This page may be copied if more space is required.

SCHEDULE III — ASSETS AND "UNEARNED" INCOME

Name DONNA MARIE CHRISTIAN-GREEN — Page 4 of 9

BLOCK A — Asset and/or Income Source

Identify (a) each asset held for investment or production of income with a fair market value exceeding $1,000 at the end of the reporting year, and (b) any other asset or source of income which generated more than $200 in "unearned" income during the year. For rental property or land, provide an address. Provide full names of any mutual funds. For an IRA or retirement plan that is *self-directed*, list the underlying assets worth more than $1,000. For an IRA or retirement plan that is *not* self-directed, name the institution holding the account.

Exclude: Your personal residence(s) (unless there is rental income); any debt owed to you by your spouse, or by your or your spouse's child, parent, or sibling; any deposits totalling $5,000 or less in personal savings accounts; any financial interests in or income derived from U.S. Government retirement programs.

If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC) or is jointly held (JT), in the optional column on the far left.

For further information, see Instructions, pages 14–20.

BLOCK B — Value of Asset

at close of reporting year. If you use a valuation method other than fair market value, please specify the method used. If an asset was sold and is included only because it generated income, the value should be "None."

BLOCK C — Type of Income

If other than one of the listed categories, specify the type of income by writing a brief description in this block.

BLOCK D — Amount of Income

For IRA's and retirement plans that are *not* self-directed, you may write in "NA" for income.

BLOCK E — Transaction

Indicate if asset was purchased (P), sold (S), or exchanged (E) in reporting year.

			A	B	C	D	E	F	G	H	I	J	K						I	II	III	IV	V	VI	VII	VIII	IX	X	
			None – $1,000	$1,001 – $15,000	$15,001 – $50,000	$50,001 – $100,000	$100,001 – $250,000	$250,001 – $500,000	$500,001 – $1,000,000	$1,000,001 – $5,000,000	$5,000,001 – $25,000,000	$25,000,001 – $50,000,000	Over $50,000,000	DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	None – $200	$201 – $1,000	$1,001 – $2,500	$2,501 – $5,000	$5,001 – $15,000	$15,001 – $50,000	$50,001 – $100,000	$100,001 – $1,000,000	$1,000,001 – $5,000,000	Over $5,000,000	P, S, E
SP, DC, JT		SP	Examples: Mega Corp Stock			X								X						X										P
			123 Main St., Dover, Del.						X						X										X					
			1st Bank of Paducah, KY accounts				X										X					X								
	1102 RICHMOND OFFICE BLDG							X						X										X					
																				(in actuality there is a NetWorth '97)									

For additional assets and unearned income, use next page.

SCHEDULE III — ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Name DONNA MARIE CHRISTIAN - GREEN | Page 5 of 9

SP, DC, JT	BLOCK A Asset and/or Income Source	BLOCK B Year-End Value of Asset											BLOCK C Type of Income						BLOCK D Amount of Income										BLOCK E Transaction
		A None – $1,000	B $1,001 – $15,000	C $15,001 – $50,000	D $50,001 – $100,000	E $100,001 – $250,000	F $250,001 – $500,000	G $500,001 – $1,000,000	H $1,000,001 – $5,000,000	I $5,000,001 – $25,000,000	J $25,000,001 – $50,000,000	K Over $50,000,000	DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	I None – $200	II $201 – $1,000	III $1,001 – $2,500	IV $2,501 – $5,000	V $5,001 – $15,000	VI $15,001 – $50,000	VII $50,001 – $100,000	VIII $100,001 – $1,000,000	IX $1,000,001 – $5,000,000	X Over $5,000,000	P, S, E

This page may be copied if more space is required.

Name DONNA MARIE CHRISTIAN-GREEN

SCHEDULE IV — TRANSACTIONS

Report any purchase, sale, or exchange by you, your spouse, or dependent child during the reporting year of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child, or the purchase or sale of your personal residence, unless it is rented out. For further information, see Instructions, pages 20–21.

SP, DC, JT	Asset	Type of Transaction: PURCHASE	SALE	EXCHANGE	Date (MO/DAY/YR)	Amount of Transaction: B $1,001–$15,000	C $15,001–$50,000	D $50,001–$100,000	E $100,001–$250,000	F $250,001–$500,000	G $500,001–$1,000,000	H $1,000,001–$5,000,000	I $5,000,001–$25,000,000	J $25,000,001–$50,000,000	K Over $50,000,000
SP	*Example:* Mega Corporation Common Stock	X			10–12–96		X								
	NONE														

This page may be copied if more space is required.

SCHEDULE V — LIABILITIES

Report liabilities of over $10,000 owed to any one creditor ***at any time*** during the reporting period by you, your spouse, or dependent child. Mark the highest amount owed during the year. **Exclude:** Any mortgage on your personal residence (unless it is rented out); loans secured by automobiles, household furniture, or appliances; and liabilities owed to a spouse, or the child, parent, or sibling of you or your spouse. Report ***revolving charge accounts*** only if the balance at the end of the reporting period exceeded $10,000. For further information, see Instructions, pages 21–22.

SP, DC, JT	Creditor	Type of Liability	Amount of Liability B ($10,001–$15,000)	C ($15,001–$50,000)	D ($50,001–$100,000)	E ($100,001–$250,000)	F ($250,001–$500,000)	G ($500,001–$1,000,000)	H ($1,000,001–$5,000,000)	I ($5,000,001–$25,000,000)	J ($25,000,001–$50,000,000)	K (Over $50,000,000)
	Example: First Bank of Wilmington, Delaware	Mortgage on 123 Main St., Dover, Del				X						
	VIRGIN ISLANDS COMMUNITY BANK	MORTGAGE - 1102 RICHMOND				X						
	V.I COMMUNITY BANK	LOAN		X								
	V.I./U.S. GOVERNMENT	TAXES		X								

SCHEDULE VI — GIFTS

Report the source, a brief description, and the value of all gifts totalling more than $250 received by you, your spouse, or a dependent child from any source during the year

Exclude: Gifts from relatives, gifts of personal hospitality of an individual, local meals, and gifts to a spouse or dependent child that are totally independent of his or her relationship to you. Gifts with a value of $100 or less need not be added towards the $250 disclosure threshold.

Note: The gift rule (House Rule 52 of the 104th Congress, renumbered as House Rule 51 of the 105th Congress) prohibits gifts except as specifically provided in the rule. For further information, see Instructions, pages 22–24.

Source	Description	Value
Example: Mr. Joseph H. Smith, Anytown, Anystate	Silver Platter (waiver received from Committee on Standards)	$270
NONE		

Use additional sheets if more space is required.

Name DONNA MARIE CHRISTIAN-GREEN | Page 8 of 9

SCHEDULE VII —TRAVEL PAYMENTS AND REIMBURSEMENTS

Identify the source and list travel itinerary, dates, and nature of expenses provided for travel and travel-related expenses totalling more than $250 received by you, your spouse, or a dependent child during the reporting period. Indicate whether a family member accompanied the traveler at the sponsor's expense, and the amount of time, if any, that was not at the sponsor's expense. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor.

Exclude: Travel-related expenses provided by federal, state, and local governments, or by a foreign government required to be separately reported under the Foreign Gifts and Decorations Act (5 U.S.C. § 7342); travel paid for by a Federal political committee; travel provided to a spouse or dependent child that is totally independent of his or her relationship to you.

	Source	Date(s)	Point of Departure—Destination—Point of Return	Lodging? (Y/N)	Food? (Y/N)	Was a Family Member Included? (Y/N)	Any time not at sponsor's expense
Examples:	Chicago Chamber of Commerce	Mar 2	Wash , D.C —Chicago—Wash., D.C.	N	N	N	N
	Roycroft Corporation	Aug 6–13	Wash , D.C —Los Angeles—Cleveland	Y	Y	Y	4 Days
	NATIONAL MEDICAL ASSN	Aug 1-7	Travel not included	X	Y	Y	2 Days

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SCHEDULE VIII — POSITIONS

Report all positions, compensated or uncompensated, held during the current calendar year as an officer, director, trustee of an organization, partner, proprietor, representative, employee, or consultant of any corporation, firm, partnership, or other business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States. For further information, see Instructions, page 26

Exclude: Positions held in any religious, social, fraternal, or political entities, positions solely of an honorary nature; and positions listed on Schedule I.

Position	Name of Organization
TRUSTEE	NATIONAL MEDICAL ASSOCIATION
BOARD MEMBER	V.I. MEDICAL INSTITUTE (PRO)
PRESIDENT	DONNA GREEN MD, PC (1102 RICHMOND-BLDG)

SCHEDULE IX — AGREEMENTS

Identify the date, parties to, and general terms of any agreement or arrangement with respect to: future employment; a leave of absence during the period of government service; continuation or deferral of payments by a former or current employer other than the U.S. Government; or continuing participation in an employee welfare or benefit plan maintained by a former employer. For further information, see Instructions, pages 26–27.

Date	Parties To	Terms of Agreement
	NONE	

GPO 1997 38-554 (mac)

Use additional sheets if more space is required.

UNITED STATES HOUSE OF REPRESENTATIVES
FINANCIAL DISCLOSURE STATEMENT

FORM B
For use by candidates and new employees

Period Covered: January 1, 199~~7~~ – ~~Dec~~ MAY 15, 1998

RECEIVED
98 MAY 14 PM 3:02
OFFICE OF THE CLERK
U.S. HOUSE OF REPRESENTATIVES
HAND DELIVERED
(Office Use Only)

DONNA M. CHRISTIAN-GREEN
(Full Name)

1102 RICHMOND SUITE #7 CHRISTIANSTED
(Mailing Address)

ST. CROIX, V.I. 00820 (809) 773-4302
Daytime Telephone

Filer Status

☒ Candidate for the House of Representatives — State/District: VIRGIN ISLANDS — Date of Election: NOV. '98

☐ New officer or employee — Employing Office: _____

Check if Amendment ☐

A *$200 penalty* shall be assessed against anybody who files more than 30 days late.

In all sections, please type or print clearly in black ink.

PRELIMINARY INFORMATION — ANSWER EACH OF THESE QUESTIONS

I. Did you or your spouse have "earned" income (e.g., salaries or fees) of $200 or more from any source in the reporting period? **If yes, complete and attach Schedule I.**	Yes ☒	No ☐	IV. Did you hold any reportable positions on or before the date of filing in the current calendar year or in the prior two years? **If yes, complete and attach Schedule IV.**	Yes ☒	No ☐
II. Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? **If yes, complete and attach Schedule II.**	Yes ☒	No ☐	V. Did you have any reportable agreement or arrangement with an outside entity? **If yes, complete and attach Schedule V.**	Yes ☐	No ☒
III. Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? **If yes, complete and attach Schedule III.**	Yes ☒	No ☐	VI. Did you receive compensation of more than $5,000 from a single source in the two prior years? **If yes, complete and attach Schedule VI.**	Yes ☐	No ☒

Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION — ANSWER EACH OF THESE QUESTIONS

TRUSTS—Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or a dependent child? (See Instructions, pages 10–11.)	Yes ☐	No ☒
EXEMPTION—Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption?	Yes ☐	No ☒

CERTIFICATION — THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended. The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct or its designee. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil penalties and criminal sanctions (*See* 5 U.S.C. app. 4, § 104 and 18 U.S.C. § 1001).

SIGNATURE OF REPORTING INDIVIDUAL M.C.

DATE (Month/Day/Year) 5-14-98

DONNA M. CHRISTIAN-GREEN
Name

SCHEDULE I—EARNED INCOME (INCLUDING HONORARIA)

List the source, type, and amount of earned income, including honoraria, from any source (other than your current employment by the U.S. Government) totalling $200 or more during the current year to the filing date *and*, separately, the preceding calendar year. For a spouse, list the source and amount of any honoraria; list only the source for other spouse earned income exceeding $1,000.

	Source (include date of receipt for honoraria)	Type	Amount	
			Current Year to Filing	Preceding Year
Examples	XYZ Corporation, Houston, Texas	Salary	$6,300	$28,450
	First Bank & Trust, Houston, Texas	Director's Fee	$400	$3,200
	XYZ Trade Association, Chicago, IL. (Rec'd 12-2-97)	Honorarium	0	$1,000
	Harris County, Texas, Public Schools	Spouse Salary	NA	NA
	Virgin Islands Medical Institute (PRO)	per-diem	0	$260

This page may be copied if more space is required.

Name DONNA MARIE CHRISTIAN-OWEN Page 3 of 5

SCHEDULE II — ASSETS AND "UNEARNED" INCOME

BLOCK A — Asset and/or Income Source

Identify (a) each asset held for investment or production of income with a fair market value exceeding $1,000 at the end of the reporting period, and (b) any other asset or source of income which generated more than $200 in "unearned" income during the period. For rental property or land, provide an address. Provide full names of any mutual funds. For an IRA or retirement plan that is *self-directed*, list the underlying assets worth more than $1,000. For an IRA or retirement plan that is *not* self-directed, name the institution holding the account.

Exclude: Your personal residence(s) (unless there is rental income); any debt owed to you by your spouse, or by your or your spouse's child, parent, or sibling; any deposits totalling $5,000 or less in personal savings accounts; any financial interests in or income derived from U.S. Government retirement programs.

If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC) or is jointly held (JT), in the optional column on the far left.

BLOCK B — Value of Asset

at close of reporting period.
If you use a valuation method other than fair market value, please specify the method used.
If an asset was sold and is included only because it generated income, the value should be "None."

BLOCK C — Type of Income

BLOCK D — Amount of Income

For IRA's and retirement plans that are *not* self-directed, you may write in "NA" for income.

			Block A: Asset and/or Income Source	Block B: Value of Asset (A None; B $1–$1,000; C $1,001–$15,000; D $15,001–$50,000; E $50,001–$100,000; F $100,001–$250,000; G $250,001–$500,000; H $500,001–$1,000,000; I $1,000,001–$5,000,000; J $5,000,001–$25,000,000; K $25,000,001–$50,000,000; L Over $50,000,000)	Block C: Type of Income (DIVIDENDS; RENT; INTEREST; CAPITAL GAINS; EXCEPTED TRUST; QUALIFIED BLIND TRUST; Other Type of Income (Specify For Example, Partnership Income or Farm Income))	Block D: Amount of Income — Current Year (I None; II $1–$200; III $201–$1,000; IV $1,001–$2,500; V $2,501–$5,000; VI $5,001–$15,000; VII $15,001–$50,000; VIII $50,001–$100,000; IX $100,001–$1,000,000; X $1,000,001–$5,000,000; XI Over $5,000,000)	Block D: Amount of Income — Preceding Year (I None; II $1–$200; III $201–$1,000; IV $1,001–$2,500; V $2,501–$5,000; VI $5,001–$15,000; VII $15,001–$50,000; VIII $50,001–$100,000; IX $100,001–$1,000,000; X $1,000,001–$5,000,000; XI Over $5,000,000)
SP, DC, JT	*Examples*	SP	Mega Corp Stock	F	DIVIDENDS	V	V
			Simon & Schuster	Indefinite			
			1st Bank of Paducah, KY accounts	G	RENT	VI	VI
			1102 RICHMOND OFFICE BLDG	H	INTEREST	VI	VI
					CAPITAL GAINS		
					EXCEPTED TRUST		
					QUALIFIED BLIND TRUST		
					Other Type of Income: Royalties	V	V

(There is actually a NET loss in '97)

For additional assets and unearned income, use next page.

Name: DONNA M CHRISTIAN-GREEN

SCHEDULE III — LIABILITIES

Report liabilities of over $10,000 owed to any one creditor ***at any time*** during the reporting period by you, your spouse, or dependent child. Mark the highest amount owed during the reporting period. **Exclude:** Any mortgage on your personal residence (unless there is rental income); loans secured by automobiles, household furniture, or appliances; and liabilities owed to a spouse, or the child, parent, or sibling of you or your spouse. Report ***revolving charge accounts*** only if the balance at the end of the reporting period exceeded $10,000.

SP, DC, JT	Creditor	Type of Liability	Amount of Liability B ($10,001—$15,000)	C ($15,001—$50,000)	D ($50,001—$100,000)	E ($100,001—$250,000)	F ($250,001—$500,000)	G ($500,001—$1,000,000)	H ($1,000,001—$5,000,000)	I ($5,000,001—$25,000,000)	J ($25,000,001—$50,000,000)	K (Over $50,000,000)
	Example: First Bank of Wilmington, Delaware	Mortgage on 123 Main Street, Dover, Del				X						
	V.I. Community Bank	Mortgage - 1102 Richmond				X						
	V.I. Community Bank	Loan -		X								
	VI/US Government	FAILED		X								

SCHEDULE IV — POSITIONS

Report all positions, compensated or uncompensated, held on or before the date of filing during the current calendar year and in the two prior years as an officer, director, trustee of an organization, partner, proprietor, representative, employee, or consultant of any corporation, firm, partnership, or other business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States.

Exclude: Positions held in any religious, social, fraternal, or political entities; positions solely of an honorary nature; and positions listed on Schedule I.

Position	Name of Organization
TRUSTEE	NATIONAL MEDICAL ASSOCIATION
BOARD MEMBER	V.I. MEDICAL INSTITUTE
PRESIDENT	DONNA GREEN, MD, P.C. (1102 RICHMOND)

Use additional sheets if more space is required.

Name DONNA MARIE CHRISTIAN-GREEN | Page 5 of 5

SCHEDULE V—AGREEMENTS

Identify the date, parties to, and general terms of any agreement or arrangement with respect to: future employment; a leave of absence during the period of government service; continuation or deferral of payments by a former or current employer other than the U.S. Government; or continuing participation in an employee welfare or benefit plan maintained by a former employer.

Date	Parties To	Terms of Agreement
	NONE	

SCHEDULE VI—COMPENSATION IN EXCESS OF $5,000 PAID BY ONE SOURCE

Report sources of such compensation received by you or your business affiliation for services provided directly by you during the *two* prior years. This includes the names of clients and customers of any corporation, firm, partnership, or other business enterprise, or any nonprofit organization if you directly provided the services generating a fee or payment of more than $5,000. **Exclude:** Payments by the U.S. Government and any information considered confidential as a result of a privileged relationship recognized by law.

Source (Name and Address)	Brief Description of Duties
Example: Doe Jones & Smith, Hometown, Homestate	Accounting services
NONE	

GPO 1998 46-261 (mac)

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1997

FORM A
For use by Members, officers, and employees

RECEIVED
97 MAY -6 P 9:44
INSIDE MAIL
MC (Office Use Only)

William L. Clay
(Full Name)

2306 Rayburn House Office Building
(Mailing Address)

(202) 225-2406
Daytime Telephone

Filer Status	[X] Member of the U.S. House of Representatives	State Missouri District First	[ ] Officer or Employee	Employing Office	A *$200 penalty* shall be assessed against anyone who files more than 30 days late.
Report Type	[X] Annual (May 15)	[ ] Amendment		[ ] Termination Termination Date	

PRELIMINARY INFORMATION — ANSWER EACH OF THESE QUESTIONS

I	Did you or your spouse have "earned" income (e.g., salaries or fees) of $200 or more from any source in the reporting period? **If yes, complete and attach Schedule I.**	Yes [ ]	No [X]	VI Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $250 and not otherwise exempt)? **If yes, complete and attach Schedule VI.**	Yes [ ] No [X]
II	Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? **If yes, complete and attach Schedule II.**	Yes [X]	No [ ]	VII Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $250 from one source)? **If yes, complete and attach Schedule VII.**	Yes [X] No [ ]
III	Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? **If yes, complete and attach Schedule III.**	Yes [X]	No [ ]	VIII Did you hold any reportable positions on or before the date of filing in the current calendar year? **If yes, complete and attach Schedule VIII.**	Yes [X] No [ ]
IV	Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset worth more than $1,000 in the reporting period? **If yes, complete and attach Schedule IV.**	Yes [X]	No [ ]	IX Did you have any reportable agreement or arrangement with an outside entity? **If yes, complete and attach Schedule IX.**	Yes [ ] No [X]
V	Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? **If yes, complete and attach Schedule V.**	Yes [X]	No [ ]	Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.	

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION — ANSWER EACH OF THESE QUESTIONS

TRUSTS—Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child?	Yes [ ]	No [X]
EXEMPTION—Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption?	Yes [ ]	No [X]

CERTIFICATION — THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended. The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct or its designee. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil penalties and criminal sanctions (*See* 5 U.S.C. app. 4, §104 and 18 U.S.C. §1001).

SIGNATURE OF REPORTING INDIVIDUAL W Clay

DATE (Month/Day/Year) 5-5-98

Name	William L. Clay	Page 1 of 11

SCHEDULE I — EARNED INCOME

List the source, type, and amount of earned income from any source (other than the filer's current employment by the U.S. Government) totalling $200 or more during the preceding calendar year. For a spouse, list the source and amount of any honoraria; list only the source for other spouse earned income exceeding $1,000.

	Source	Type	Amount
Examples	Keene State	Approved Teaching Fee	$6,000
	State of Maryland	Legislative Pension	$9,000
	Civil War Roundtable (Oct. 2nd)	Spouse Speech	$1,000
	Ontario County Board of Education	Spouse Salary	NA
	Bargo Press	Book Royalties	$ 74.00
	Just Permanent Interest	Book Royalties	$ 1,619.00

For payments to charity in lieu of honoraria, use Schedule II

SCHEDULE III — ASSETS AND "UNEARNED" INCOME

Name: William L. Clay | Page 3 of 11

BLOCK A — Asset and/or Income Source

Identify (a) each asset held for investment or production of income with a fair market value exceeding $1,000 at the end of the reporting year, and (b) any other asset or source of income which generated more than $200 in "unearned" income during the year. For rental property or land, provide an address. Provide full names of any mutual funds. For an IRA or retirement plan that is *self-directed*, list the underlying assets worth more than $1,000. For an IRA or retirement plan that is not self-directed, name the institution holding the account.

Exclude: Your personal residence(s) (unless there is rental income); any debt owed to you by your spouse, or by your or your spouse's child, parent, or sibling; any deposits totalling $5,000 or less in personal savings accounts; any financial interests in or income derived from U.S. Government retirement programs.

If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC) or is jointly held (JT) in the optional column on the far left.

SP		SP	Mega Corp. Stock
DC	*Examples*		Simon & Schuster
JT			1st Bank of Paducah, KY accounts

BLOCK B — Value of Asset

at close of reporting year. If you use a valuation method other than fair market value, please specify the method used. If an asset was sold and is included only because it generated income, the value should be "None."

	A None	B $1 – $1,000	C $1,001 – $15,000	D $15,001 – $50,000	E $50,001 – $100,000	F $100,001 – $250,000	G $250,001 – $500,000	H $500,001 – $1,000,000	I $1,000,001 – $5,000,000	J $5,000,001 – $25,000,000	K $25,000,001 – $50,000,000	L Over $50,000,000
			Indefinite									
Certificate of Deposit Cong. Credit Union			X									
" "			X									
" "			X									
" "			X									
" "			X									
" "			X									

BLOCK C — Type of Income

	DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Type of Income (Specify. For Example: Partnership Income or Farm Income)
Certificate of Deposit Cong. Credit Union			X				
" "			X				
" "			X				
" "			X				
" "			X				
" "			X				
Examples	X						Royalties

BLOCK D — Amount of Income

For IRA's and retirement plans that are *not* self-directed, you may write in "NA" for income.

	I None	II $1 – $200	III $201 – $1,000	IV $1,001 – $2,500	V $2,501 – $5,000	VI $5,001 – $15,000	VII $15,001 – $50,000	VIII $50,001 – $100,000	IX $100,001 – $1,000,000	X $1,000,001 – $5,000,000	XI Over $5,000,000
Certificate of Deposit Cong. Credit Union		X									
" "		X									
" "		X									
" "				X							
" "					X						
" "					X						
" "					X						

BLOCK E — Transaction

Indicate if asset was purchased (P), sold (S), or exchanged (E) in reporting year

P
P
P
P
P
P

For additional assets and unearned income, use next page.

SCHEDULE III — ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Name William L. Clay | Page 4 of 11

SP, DC, JT	BLOCK A Asset and/or Income Source	BLOCK B Year-End Value of Asset											BLOCK C Type of Income							BLOCK D Amount of Income										BLOCK E Transaction
		A None	B $1 – $1,000	C $1,001 – $15,000	D $15,001 – $50,000	E $50,001 – $100,000	F $100,001 – $250,000	G $250,001 – $500,000	H $500,001 – $1,000,000	I $1,000,001 – $5,000,000	J $5,000,001 – $25,000,000	K $25,000,001 – $50,000,000	L Over $50,000,000	DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Type of Income (Specify)	I None	II $1 – $200	III $201 – $1,000	IV $1,001 – $2,500	V $2,501 – $5,000	VI $5,001 – $15,000	VII $15,001 – $50,000	VIII $50,001 – $100,000	IX $100,001 – $1,000,000	X $1,000,001 – $5,000,000	XI Over $5,000,000	P, S, E
	Certificate of Deposit				X											X								X						
	Cong. Credit Union																													
	" " "			X												X						X								
	Savings Account				X											X								X						
	Congressional Credit U.																													
	Certificate of Deposit			X												X								X						
	Pulaski Savings & Loan																													
	Savings Account				X											X								X						
	Sandy Spring Nat'l Bank																													
	Certificate of Deposit				X											X								X						
	Sandy Spring Nat'l Bank																													
	A.G. Edwards			X										X									X							
	" "			X										X									X							
	American Express			X										X								X								
	Ameren		X											X							X									E
	Anheuser Busch			X										X									X							
	" "			X										X									X							
	" "				X									X										X						
	AT&T			X										X								X								
	Browning-Ferris, Inc.		X											X								X								
	Centennial Money Market			X										X								X								
	Dave & Buster, Inc.		X											X							X									
	Dial		X											X								X								
	Earth Grains		X											X								X								
	" "		X											X								X								
	Edison Bros		X											X								X								
	I. C. Whitman			X										X								X								

This page may be copied if more space is required.

SCHEDULE III — ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Name: William L. Clay | Page 5 of 11

SP. DC. JT	BLOCK A Asset and/or Income Source	BLOCK B Year-End Value of Asset											BLOCK C Type of Income							BLOCK D Amount of Income										BLOCK E Transaction
		A None	B $1 – $1,000	C $1,001 – $15,000	D $15,001 – $50,000	E $50,001 – $100,000	F $100,001 – $250,000	G $250,001 – $500,000	H $500,001 – $1,000,000	I $1,000,001 – $5,000,000	J $5,000,001 – $25,000,000	K $25,000,001 – $50,000,000	L Over $50,000,000	DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Type of Income (Specify)	I None	II $1 – $200	III $201 – $1,000	IV $1,001 – $2,500	V $2,501 – $5,000	VI $5,001 – $15,000	VII $15,001 – $50,000	VIII $50,001 – $100,000	IX $100,001 – $1,000,000	X $1,000,001 – $5,000,000	XI Over $5,000,000	P, S, E
	Insituform Mid-America			X									X									X								
	" " "			X									X									X								
	Johnson & Johnson			X									X									X								
	" " "			X									X									X								
	" " "			X									X									X								
	Jones Medical, Inc.			X									X									X								
	" " "			X									X									X								
	" " "			X									X											X						
	" " "				X								X											X						
	" " "				X								X									X								
	" " "			X									X									X								
	" " "			X									X									X								
	" " "			X									X									X								
	Laclede Gas			X									X									X								
	" "			X									X									X								
	Lehman Bros Holdings			X									X									X								
	Lucent Tech		X										X									X								
	Rally's Hamburger			X									X									X								
	Schwartz Bros	X											X									X								
	Southwestern Bell (SBC)		X										X										X							
	Southwestern Bell(SBC)		X										X										X							
	" " "		X										X									X								

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SCHEDULE III — ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Name: William L. Clay | Page 9 of 11

SP. DC. JT	BLOCK A Asset and/or Income Source	BLOCK B Year-End Value of Asset												BLOCK C Type of Income							BLOCK D Amount of Income										BLOCK F Transaction
		A None	B $1 - $1,000	C $1,001 - $15,000	D $15,001 - $50,000	E $50,001 - $100,000	F $100,001 - $250,000	G $250,001 - $500,000	H $500,001 - $1,000,000	I $1,000,001 - $5,000,000	J $5,000,001 - $25,000,000	K $25,000,001 - $50,000,000	L Over $50,000,000	DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Type of Income (Specify)	I None	II $1 - $200	III $201 - $1,000	IV $1,001 - $2,500	V $2,501 - $5,000	VI $5,001 - $15,000	VII $15,001 - $50,000	VIII $50,001 - $100,000	IX $100,001 - $1,000,000	X $1,000,001 - $5,000,000	XI Over $5,000,000	P, S, E
	Southwestern Bell(SBC)			X										X								X									
	Union Electric			X										X								X									
	" "			X										X								X									
	UNUM				X									X									X								
	"				X									X									X								Split
	URS			X										X								X									
	Xerox			X										X								X									
	Xerox			X										X								X									
	Board of Elections St. Louis			X												X							X								
	Baltimore Md. CTFS of Partnership		X										X										X								
	Baltimore MD Hospital			X												X							X								
	Insured Municipal IncomeTr.			X												X							X								
	" " " Trust			X												X							X								
	Kansas City Missouri School			X												X							X								
	Mississippi State Hwy.			X												X							X								
	Missouri Econ Dev.(Police Board)				X											X							X								
	Missouri State Health Barnes/Jewish			X												X							X								
	" " "				X											X							X								
	Missouri State Health (Heartland)			X												X							X								
	Missouri State Housing (GNMA Single)			X												X							X								
	Missouri State Health Bethesda Eye Institute			X												X							X								
	Missouri Forth State Building			X												X							X								

This page may be copied if more space is required.

SCHEDULE III — ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Name: William L. Clay | Page 7 of 11

SP, DC, JT	BLOCK A: Asset and/or Income Source	BLOCK B: Year-End Value of Asset												BLOCK C: Type of Income							BLOCK D: Amount of Income											BLOCK E: Transaction
		A None	B $1 – $1,000	C $1,001 – $15,000	D $15,001 – $50,000	E $50,001 – $100,000	F $100,001 – $250,000	G $250,001 – $500,000	H $500,001 – $1,000,000	I $1,000,001 – $5,000,000	J $5,000,001 – $25,000,000	K $25,000,001 – $50,000,000	L Over $50,000,000	DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Type of Income (Specify)	I None	II $1 – $200	III $201 – $1,000	IV $1,001 – $2,500	V $2,501 – $5,000	VI $5,001 – $15,000	VII $15,001 – $50,000	VIII $50,001 – $100,000	IX $100,001 – $1,000,000	X $1,000,001 – $5,000,000	XI Over $5,000,000	P, S, E
	N.Y. State Mortgage			X												X							X								
	Monsanto Chemical			X										X								X									P
	N.Y. State Mortgage			X												X							X								
	St. Charles County			X												X							X									P
	St. Louis Airport (Lambert)			X												X							X								
	St. Louis University			X												X							X									P
	St. Louis County General			X												X								X								
	St. Louis Municipal Finance			X												X							X								
	St. Louis Convention & Sport			X												X																P
	Puerto Rico Highway			X												X						X										
	SouthEast Missouri Correctional			X												X							X									
	NCR		X										X	X								X										spinoff
	Takoma Park Hospital			X												X							X									
	VIAD			X									X									X										

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SCHEDULE IV — TRANSACTIONS

Name William L. Clay | Page 8 of 11

Report any purchase, sale, or exchange by you, your spouse, or dependent child during the reporting year of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child, or the purchase or sale of your personal residence, unless it is rented out.

SP, DC, JT	Asset	Type of Transaction: PURCHASE	SALE	EXCHANGE	Date (MO/DAY/YR)	Amount of Transaction: B ($1,001–$15,000)	C ($15,001–$50,000)	D ($50,001–$100,000)	E ($100,001–$250,000)	F ($250,001–$500,000)	G ($500,001–$1,000,000)	H ($1,000,001–$5,000,000)	I ($5,000,001–$25,000,000)	J ($25,000,001–$50,000,000)	K (Over $50,000,000)
SP	*Example* Mega Corporation Common Stock	X			10-12-97		X								
	Insured Municipals Inc Trusts (IM-IT)		X		3/18/97	X									
	Jewish Missouri State		X		1/20/97		X								
	Missouri Third Estate		X		8/1/97	X									
	Missouri State Health(Childrens Hospital)		X		6/1/97	X									
	St. Louis Convention & Sports	X			5/7/97	X									
	St. Louis University	X			1/27/97	X									
	St. Charles County	X			1/27/97	X									
	AMEREN			X	12/31/97	X									
	Earthgrains			X	7/28/97	X									
	Monsanto Chemical	X			5/6/97	X									
	NCR			X	1/14/97	X									
	UNUM			X	6/1/97	X									
	Cracker Barrel		X		5/10/97	X									
	" "		X		5/10/97	X									

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Name	Page of

SCHEDULE V — LIABILITIES

Report liabilities of over $10,000 owed to any one creditor ***at any time*** during the reporting period by you, your spouse, or dependent child. Mark the highest amount owed during the year. **Exclude:** Any mortgage on your personal residence (unless it is rented out), loans secured by automobiles, household furniture, or appliances, and liabilities owed to a spouse, or the child, parent, or sibling of you or your spouse. Report ***revolving charge accounts*** only if the balance at the end of the reporting period exceeded $10,000.

SP, DC, JT	Creditor	Type of Liability	Amount of Liability									
			B $10,001–$15,000	C $15,001–$50,000	D $50,001–$100,000	E $100,001–$250,000	F $250,001–$500,000	G $500,001–$1,000,000	H $1,000,001–$5,000,000	I $5,000,001–$25,000,000	J $25,000,001–$50,000,000	K Over $50,000,000
	Example First Bank of Wilmington, Delaware	Mortgage on 123 Main St., Dover, Del				X						
	NONE											

SCHEDULE VI — GIFTS

Report the source, a brief description, and the value of all gifts totalling more than $250 received by you, your spouse, or a dependent child from any source during the year.

Exclude: Gifts from relatives, gifts of personal hospitality of an individual, local meals, and gifts to a spouse or dependent child that are totally independent of his or her relationship to you. Gifts with a value of $100 or less need not be added towards the $250 disclosure threshold.

Note: The gift rule (House Rule 51) prohibits gifts except as specifically provided in the rule.

Source	Description	Value
Example Mr. Joseph H. Smith, Anytown, Anystate	Silver Platter (determination on personal friendship received from Committee on Standards)	$270
NONE		

Use additional sheets if more space is required.

SCHEDULE VII —TRAVEL PAYMENTS AND REIMBURSEMENTS

Identify the source and list travel itinerary, dates, and nature of expenses provided for travel and travel-related expenses totalling more than $250 received by you, your spouse, or a dependent child during the reporting period. Indicate whether a family member accompanied the traveler at the sponsor's expense, and the amount of time, if any, that was not at the sponsor's expense. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor.

Exclude: Travel-related expenses provided by federal, state, and local governments, or by a foreign government required to be separately reported under the Foreign Gifts and Decorations Act (5 U.S.C. § 7342); travel paid for by a Federal political committee; travel provided to a spouse or dependent child that is totally independent of his or her relationship to you.

Source	Date(s)	Point of Departure—Destination—Point of Return	Lodging? (Y/N)	Food? (Y/N)	Was a Family Member Included? (Y/N)	Any time not at sponsor's expense
Examples: Chicago Chamber of Commerce	Mar. 2	Wash., D.C.—Chicago—Wash., D.C.	N	N	N	N
Examples: Roycroft Corporation	Aug. 6–13	Wash., D.C.—Los Angeles—Cleveland	Y	Y	Y	4 Days
Morehouse School of Medicine	9/18/97	Wash.DC-Atlanta-Wash DC	Y	Y	NO	N 2 days
Black Pilots Association	8/6-9/97	Dallas TX.	Y	Y	Yes	N 3 days

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SCHEDULE VIII — POSITIONS

Report all positions, compensated or uncompensated, held during the current calendar year as an officer, director, trustee of an organization, partner, proprietor, representative, employee, or consultant of any corporation, firm, partnership, or other business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States

Exclude: Positions held in any religious, social, fraternal, or political entities; positions solely of an honorary nature, and positions listed on Schedule I

Position	Name of Organization
Trustee	W.E. Dubois Foundation
Trustee	Congressional Black Caucus Foundation
Trustee Emeritus	Tougaloo College

SCHEDULE IX — AGREEMENTS

Identify the date, parties to, and general terms of any agreement or arrangement with respect to: future employment, a leave of absence during the period of government service; continuation or deferral of payments by a former or current employer other than the U S. Government; or continuing participation in an employee welfare or benefit plan maintained by a former employer

Date	Parties To	Terms of Agreement
	NONE	

GPO 1998 46-260 (mac)

Use additional sheets if more space is required.

WILLIAM L. CLAY
1st District, Missouri

COMMITTEE ON
EDUCATION AND THE
WORKFORCE

RANKING DEMOCRATIC MEMBER

MAILING ADDRESS:
2308 Rayburn House Office Building
Washington, DC 20515-2501
Telephone: (202) 225-2406

HARRIET PRITCHETT GRIGSBY
ADMINISTRATIVE ASSISTANT

RECEIVED
98 APR 30 PM 2:57
OFFICE OF THE CLERK
U.S. HOUSE OF REPRESENTATIVES

HAND DELIVERED

DISTRICT OFFICES:
5261 Delmar Boulevard
Suite B
St. Louis, MO 63108
Telephone: (314) 367-1970

12765 New Halls Ferry
New Halls Ferry Plaza
Florissant, MO 63033
Telephone: (314) 839-5148

PEARLIE I. EVANS
DISTRICT ASSISTANT

VIRGINIA M. COOK
DISTRICT COORDINATOR

Congress of the United States

House of Representatives

Washington, DC 20515-2501

April 29, 1998

RECEIVED
98 APR 30 11:10:03
COMMITTEE ON STANDARDS

Congressman James V. Hansen,
Chairman
Committee on Standards Of
Official Conduct
Suite Ht-2, The Capitol
Washington, D.C. 20515

Dear Mr. Chairman:

This letter is in reference to my 1996 financial disclosure statement for calendar year 1996. Under assets and "unearned" income I should have included the entry of Baltimore, Maryland Certificates Of Partner ..Purchased May 10, 1996, it was omitted by error. Under Block B (value of Asset) should be "C" colum - Block C (type of income) should be interest - Block D(amount of income) should be - none-$200.00 - Block F(Transaction) should be purchase.

Sincerely,

William L. Clay
Member of Congress

WLC:em

WILLIAM L. CLAY
1st DISTRICT, MISSOURI
COMMITTEE ON
EDUCATION AND THE
WORKFORCE
RANKING DEMOCRATIC MEMBER
MAILING ADDRESS:
2306 RAYBURN HOUSE OFFICE BUILDING
WASHINGTON, DC 20515-2501
TELEPHONE: 202-225-2406
HARRIET PRITCHETT GRIGSBY
ADMINISTRATIVE ASSISTANT

Congress of the United States

House of Representatives

Washington, DC 20515-2501

May 22, 1998

INSIDE MAIL

DISTRICT OFFICE
5201 DELMAR BOULEVARD
SUITE B
ST. LOUIS, MO 63108
TELEPHONE: (314) 361-1970
NEW HAVEN OFFICE
12755 NEW HAVEN PLAZA
NEW HAVEN, MO 63068
TELEPHONE: (314) 329-2248
PEARLIE C. CLAY
DISTRICT ASSISTANT
VIRGINIA M. COOK
DISTRICT COORDINATOR

Chairman James V. Hansen
Honorable Howard L. Berman
COMMITTEE ON STANDARDS OF
OFFICAL CONDUCT

Dear Colleagues:

This is in response to your letter of May 14, 1998, indicating a need for additional information on my Financial Disclosure statement.

1. On page 1, Preliminary Information, box number V. reportable liability (more than $10,000.00) checked "yes" should have been checked "no".

   There is no listing on page 9 of liabilities as reported on 1997 Disclosure form because 14917 Claude Lane, Silver Spring, Maryland is my personal residence and I chose not to list it on the report this year.

2. Page 2, showing the receipt of a $200.00 honorarium from St. Elizabeth Church (Speech, April 5, 1997) was ommited by error.

3. Page 4, second entry of Earth Grains was the result of split.

4. Page 5, Schwartz Bros notation of "no" value was the result of the company going bankrupt. Stockholders received no compensation. Entry in Block B year-end value of "none" is correct. Block D amount of income should reflect "none".

5. Under Schedule III, Jewish Missouri State, Missouri Third Estate, Missouri State Health (Children's Hospital) were recalled. Each should be listed as "interest income" ranging between $201-$1,000.

   Cracker Barrel was sold. It should be listed as "dividend income" ranging between $1-$200.

   NCR should be listed as "spin off" from AT&T.

6. Page 8, under Schedule IV, "type of transaction" for UNUM should be noted as "split" with "amount of transaction" between $1,000 $15,000.

Sincerely,

William L. Clay
Member of Congress

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1997

FORM A
For use by Members, officers, and employees

RECEIVED
99 MAY 21 AM 8 31
OFFICE OF THE CLERK
HOUSE OF REPRESENTATIVES

MAY 15 1998
(Office Use Only)

EVA M. CLAYTON
(Full Name)

59 RIVER ROAD
(Mailing Address)

LITTLETON NC 27850

Daytime Telephone
(202) 225-3101

Filer Status	[X]	Member of the U S House of Representatives	State ____ District ____	[ ] Officer or Employee	Employing Office ____
Report Type	[X]	Annual (May 15)	[ ] Amendment	[ ] Termination	Termination Date ____

A *$200 penalty* shall be assessed against anyone who files more than 30 days late.

PRELIMINARY INFORMATION — ANSWER EACH OF THESE QUESTIONS

I Did you or your spouse have "earned" income (e.g , salaries or fees) of $200 or more from any source in the reporting period? **If yes, complete and attach Schedule I.** Yes [X] No [ ]

II Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? **If yes, complete and attach Schedule II.** Yes [ ] No [X]

III Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? **If yes, complete and attach Schedule III.** Yes [X] No [ ]

IV Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset worth more than $1,000 in the reporting period? **If yes, complete and attach Schedule IV.** Yes [ ] No [ ]

V Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? **If yes, complete and attach Schedule V.** Yes [ ] No [X]

VI. Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e , aggregating more than $250 and not otherwise exempt)? **If yes, complete and attach Schedule VI** Yes [ ] No [X]

VII. Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $250 from one source)? **If yes, complete and attach Schedule VII.** Yes [X] No [ ]

VIII Did you hold any reportable positions on or before the date of filing in the current calendar year? **If yes, complete and attach Schedule VIII.** Yes [ ] No [X]

IX. Did you have any reportable agreement or arrangement with an outside entity? **If yes, complete and attach Schedule IX.** Yes [ ] No [X]

Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION — ANSWER EACH OF THESE QUESTIONS

TRUSTS—Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child? Yes [x] No [ ]

EXEMPTION—Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption? Yes [x] No [ ]

CERTIFICATION — THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

This Financial Disclosure Statement is required by the Ethics In Government Act of 1978, as amended The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct or its designee Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil penalties and criminal sanctions (*See* 5 U S C app 4, §104 and 18 U S C §1001)

SIGNATURE OF REPORTING INDIVIDUAL: Eva M. Clayton

DATE (Month/Day/Year): 05/15/98

SCHEDULE I — EARNED INCOME

List the source, type, and amount of earned income from any source (other than the filer's current employment by the U S Government) totalling $200 or more during the preceding calendar year. For a spouse, list the source and amount of any honoraria; list only the source for other spouse earned income exceeding $1,000.

Source	Type	Amount
Examples Keene State	Approved Teaching Fee	$6,000
State of Maryland	Legislative Pension	$9,000
Civil War Roundtable (Oct 2nd)	Spouse Speech	$1,000
Ontario County Board of Education	Spouse Salary	NA
THEAOSEUS T. CLAYTON, P.A.	SPOUSE SALARY	NA

For payments to charity in lieu of honoraria, use Schedule II.

SCHEDULE III — ASSETS AND "UNEARNED" INCOME

Name: EVA M. CLAYTON | Page 3 of 5

BLOCK A — Asset and/or Income Source

Identify (a) each asset held for investment or production of income with a fair market value exceeding $1,000 at the end of the reporting year, and (b) any other asset or source of income which generated more than $200 in "unearned" income during the year. For rental property or land, provide an address. Provide full names of any mutual funds. For an IRA or retirement plan that is *self-directed*, list the underlying assets worth more than $1,000. For an IRA or retirement plan that is not self-directed, name the institution holding the account.

Exclude: Your personal residence(s) (unless there is rental income), any debt owed to you by your spouse, or by your or your spouse's child, parent, or sibling, any deposits totalling $5,000 or less in personal savings accounts, any financial interests in or income derived from U.S. Government retirement programs.

If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC) or is jointly held (JT), in the optional column on the far left.

BLOCK B — Value of Asset

at close of reporting year. If you use a valuation method other than fair market value, please specify the method used. If an asset was sold and is included only because it generated income, the value should be "None."

BLOCK C — Type of Income

BLOCK D — Amount of Income

For IRA's and retirement plans that are *not* self-directed, you may write in "NA" for income.

BLOCK E — Transaction

Indicate if asset was purchased (P), sold (S), or exchanged (E) in reporting year

	BLOCK A	B	C	E	F	G	H	I	J	K	L	C							D											E
		None	$1 – $1,000	$1,001 – $15,000	$15,001 – $50,000	$50,001 – $100,000	$100,001 – $250,000	$250,001 – $500,000	$500,001 – $1,000,000	$1,000,001 – $5,000,000	$5,000,001 – $25,000,000	$25,000,001 – $50,000,000	Over $50,000,000	DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Type of Income (Specify. For Example: Partnership Income or Farm Income)	None	$1 – $200	$201 – $1,000	$1,001 – $2,500	$2,501 – $5,000	$5,001 – $15,000	$15,001 – $50,000	$50,001 – $100,000	$100,001 – $1,000,000	$1,000,001 – $5,000,000	Over $5,000,000	
		A	B	C	E	F	G	H	I	J	K	L									I	II	III	IV	V	VI	VII	VIII	IX	X	XI	
SP, DC, JT	*Examples*			Indefinite		X								X						Royalties				X							P
																X									X			X			
JT	307 W Franklin St																														
	Warrenton, NC			X											X									X							
	BB&T, Warrenton NC			X												X							X								
SP	BB&T, Warrenton NC			X											IRA									X							

For additional assets and unearned income, use next page.

SCHEDULE V — LIABILITIES

Report liabilities of over $10,000 owed to any one creditor ***at any time*** during the reporting period by you, your spouse, or dependent child. Mark the highest amount owed during the year. **Exclude:** Any mortgage on your personal residence (unless it is rented out), loans secured by automobiles, household furniture, or appliances; and liabilities owed to a spouse, or the child, parent, or sibling of you or your spouse. Report ***revolving charge accounts*** only if the balance at the end of the reporting period exceeded $10,000.

SP, DC, JT	Creditor	Type of Liability	Amount of Liability									
			B $10,001–$15,000	C $15,001–$50,000	D $50,001–$100,000	E $100,001–$250,000	F $250,001–$500,000	G $500,001–$1,000,000	H $1,000,001–$5,000,000	I $5,000,001–$25,000,000	J $25,000,001–$50,000,000	K Over $50,000,000
	Example First Bank of Wilmington, Delaware	Mortgage on 123 Main St., Dover, Del				X						
SP	First Citizens Bank, Warrenton, NC	Mortgage on 307 W Franklin Street, Warrenton, NC Property		X								

SCHEDULE VI — GIFTS

Report the source, a brief description, and the value of all gifts totalling more than $250 received by you, your spouse, or a dependent child from any source during the year.

Exclude: Gifts from relatives, gifts of personal hospitality of an individual, local meals, and gifts to a spouse or dependent child that are totally independent of his or her relationship to you. Gifts with a value of $100 or less need not be added towards the $250 disclosure threshold.

Note: The gift rule (House Rule 51) prohibits gifts except as specifically provided in the rule.

Source	Description	Value
Example: Mr. Joseph H. Smith, Anytown, Anystate	Silver Platter (determination on personal friendship received from Committee on Standards)	$270

Use additional sheets if more space is required.

Name	EVA M. CLAYTON	Page 5 of 5

SCHEDULE VII —TRAVEL PAYMENTS AND REIMBURSEMENTS

Identify the source and list travel itinerary, dates, and nature of expenses provided for travel and travel-related expenses totalling more than $250 received by you, your spouse, or a dependent child during the reporting period. Indicate whether a family member accompanied the traveler at the sponsor's expense, and the amount of time, if any, that was not at the sponsor's expense. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor.

Exclude: Travel-related expenses provided by federal, state, and local governments, or by a foreign government required to be separately reported under the Foreign Gifts and Decorations Act (5 U.S.C. § 7342); travel paid for by a Federal political committee; travel provided to a spouse or dependent child that is totally independent of his or her relationship to you.

Source	Date(s)	Point of Departure—Destination—Point of Return	Lodging? (Y/N)	Food? (Y/N)	Was a Family Member Included? (Y/N)	Any time not at sponsor's expense
Examples: Chicago Chamber of Commerce	Mar. 2	Wash., D.C.—Chicago—Wash., D.C.	N	N	N	N
Roycroft Corporation	Aug. 6–13	Wash., D.C.—Los Angeles—Cleveland	Y	Y	Y	4 Days
The Aspen Institute	Feb. 14	Raleigh NC-W Palm Beach FL	Y	Y	Y	N
Congressional Program	Feb. 17	W Palm Beach FL-Raleigh NC				
The Aspen Institute	Aug. 18	Washington DC-Frankfurt, Germany-Budapest-Dresden	Y	Y	Y	N
Congressional Program	Aug. 23	Dresden, Germany-Raleigh NC				

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CLERK OF THE HOUSE

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1997

FORM A
For use by Members, officers, and employees

ROBERT (BOB) N. CLEMENT
(Full Name)

2229 RAYBURN BUILDING
(Mailing Address)

WASHINGTON, DC 20515

Daytime Telephone
(202) 225-4311

HAND DELIVERED
(Office Use Only)

Filer Status	[X] Member of the U.S. House of Representatives	State TN District 5	[ ] Officer or Employee	Employing Office	A *$200 penalty* shall be assessed against anyone who files more than 30 days late.
Report Type	[X] Annual (May 15)	[ ] Amendment	[ ] Termination	Termination Date	

PRELIMINARY INFORMATION — ANSWER EACH OF THESE QUESTIONS

I Did you or your spouse have "earned" income (e.g., salaries or fees) of $200 or more from any source in the reporting period? **If yes, complete and attach Schedule I.**	Yes [ ]	No [X]	VI Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $250 and not otherwise exempt)? **If yes, complete and attach Schedule VI.**	Yes [ ]	No [X]
II Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? **If yes, complete and attach Schedule II.**	Yes [X]	No [ ]	VII Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $250 from one source)? **If yes, complete and attach Schedule VII**	Yes [X]	No [ ]
III Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? **If yes, complete and attach Schedule III.**	Yes [X]	No [ ]	VIII Did you hold any reportable positions on or before the date of filing in the current calendar year? **If yes, complete and attach Schedule VIII**	Yes [X]	No [ ]
IV Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset worth more than $1,000 in the reporting period? **If yes, complete and attach Schedule IV.**	Yes [X]	No [ ]	IX Did you have any reportable agreement or arrangement with an outside entity? **If yes, complete and attach Schedule IX.**	Yes [ ]	No [X]
V Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? **If yes, complete and attach Schedule V.**	Yes [ ]	No [X]	Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.		

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION — ANSWER EACH OF THESE QUESTIONS

TRUSTS—Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child?	Yes [ ]	No [X]
EXEMPTION—Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption?	Yes [ ]	No [X]

CERTIFICATION — THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended. The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct or its designee. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil penalties and criminal sanctions (*See* 5 U.S.C. app. 4, §104 and 18 U.S.C. §1001)

SIGNATURE OF REPORTING INDIVIDUAL

DATE (Month/Day/Year) 5/14/98

651

SCHEDULE II — PAYMENTS IN LIEU OF HONORARIA MADE TO CHARITY

List the source, activity (i.e., speech, appearance, or article), date, and amount of any payment made by the sponsor of an event to a charitable organization in lieu of an honorarium. A separate confidential list of charities receiving such payments must be filed directly with the Committee on Standards of Official Conduct. An envelope for transmitting the list is included in each Member's filing package.

Source	Activity	Date	Amount
Examples Association of American Associations, Wash., D.C.	Speech	Feb. 2, 1997	$2,000
XYZ Magazine	Article	Aug. 13, 1997	$500
The Tobacco Institute	Speech	Oct. 21, 1997	$2,000.00*

This page may be copied if more space is required. *Tobacco Institute remitted payments to charities on 1-27-98

SCHEDULE III — ASSETS AND "UNEARNED" INCOME

BLOCK A — Asset and/or Income Source

Identify (a) each asset held for investment or production of income with a fair market value exceeding $1,000 at the end of the reporting year, and (b) any other asset or source of income which generated more than $200 in "unearned" income during the year. For rental property or land, provide an address. Provide full names of any mutual funds. For an IRA or retirement plan that is *self-directed*, list the underlying assets worth more than $1,000. For an IRA or retirement plan that is not self-directed, name the institution holding the account.

Exclude: Your personal residence(s) (unless there is rental income), any debt owed to you by your spouse, or by your or your spouse's child, parent, or sibling, any deposits totalling $5,000 or less in personal savings accounts, any financial interests in or income derived from U.S. Government retirement programs.

If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC) or is jointly held (JT), in the optional column on the far left.

BLOCK B — Value of Asset

at close of reporting year. If you use a valuation method other than fair market value, please specify the method used. If an asset was sold and is included only because it generated income, the value should be "None."

BLOCK C — Type of Income

BLOCK D — Amount of Income

For IRA's and retirement plans that are *not* self-directed, you may write in "NA" for income.

BLOCK E — Transaction

Indicate if asset was purchased (P), sold (S), or exchanged (E) in reporting year.

	BLOCK A	B: None	A: $1 – $1,000	B: $1,001 – $15,000	C: $15,001 – $50,000	E: $50,001 – $100,000	F: $100,001 – $250,000	G: $250,001 – $500,000	H: $500,001 – $1,000,000	I: $1,000,001 – $5,000,000	J: $5,000,001 – $25,000,000	K: $25,000,001 – $50,000,000	L: Over $50,000,000	C: DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Type of Income (Specify For Example Partnership Income or Farm Income)	D: I None	II $1 – $200	III $201 – $1,000	IV $1,001 – $2,500	V $2,501 – $5,000	VI $5,001 – $15,000	VII $15,001 – $50,000	VIII $50,001 – $100,000	IX $100,001 – $1,000,000	X $1,000,001 – $5,000,000	XI Over $5,000,000	E: P, S, E
SP																																
DC	*Examples*			Indefinite		X								X										X							P
JT							X									X				Royalties						X					
	Dickson Financial Corp Stock, Dickson, TN					X								X									X								
	25 Acres Farmland Wilson Co., TN							X													X										
	Rental Property, 4420 East Brookfield, Nashville, TN							X							X											X					

For additional assets and unearned income, use next page.

SCHEDULE III — ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Name ROBERT (BOB) N. CLEMENT | Page 4 of 13

BLOCK A	BLOCK B												BLOCK C							BLOCK D										BLOCK E
Asset and/or Income Source	Year-End Value of Asset												Type of Income							Amount of Income										Transaction
SP DC JT	A None	B $1 – $1,000	C $1,001 – $15,000	D $15,001 – $50,000	E $50,001 – $100,000	F $100,001 – $250,000	G $250,001 – $500,000	H $500,001 – $1,000,000	I $1,000,001 – $5,000,000	J $5,000,001 – $25,000,000	K $25,000,001 – $50,000,000	L Over $50,000,000	DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Type of Income (Specify)	I None	II $1 – $200	III $201 – $1,000	IV $1,001 – $2,500	V $2,501 – $5,000	VI $5,001 – $15,000	VII $15,001 – $50,000	VIII $50,001 – $100,000	IX $100,001 – $1,000,000	X $1,000,001 – $5,000,000	XI Over $5,000,000	P, S, E
RSC Inv. Real Estate Holdings, Hwy 46, Dickson, TN, 9% partnership interest				X										X							X									
															X							X									
																X									X						
Forrest Hills Development Real Estate Held for Invest Hwy 70, Dickson, TN; 6 2/3% partnership interest			X													X				X			X							
Maybelle C. Clement Invest. Dickson, TN; 1/9 partnership interest			X													X				X			X							
Franklin Nat'l Bank Stock Franklin, TN						X														X										
First American Savings Acct Nashville, TN			X												X							X								
Teachers Ins & Annuity Assn, College Retirement Fund: Regular/Supplemental						X										N.A.								N.A.							
State of TN Retirement				X												N.A.								N.A.							

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SCHEDULE III — ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Name ROBERT (BOB) N. CLEMENT

Page 5 of 13

SP. DC. JT	BLOCK A Asset and/or Income Source	BLOCK B Year-End Value of Asset											BLOCK C Type of Income							BLOCK D Amount of Income										BLOCK E Transaction
		A None	B $1 – $1,000	C $1,001 – $15,000	D $15,001 – $50,000	E $50,001 – $100,000	F $100,001 – $250,000	G $250,001 – $500,000	H $500,001 – $1,000,000	I $1,000,001 – $5,000,000	J $5,000,001 – $25,000,000	K $25,000,001 – $50,000,000	L Over $50,000,000	DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Type of Income (Specify)	I None	II $1 – $200	III $201 – $1,000	IV $1,001 – $2,500	V $2,501 – $5,000	VI $5,001 – $15,000	VII $15,001 – $50,000	VIII $50,001 – $100,000	IX $100,001 – $1,000,000	X $1,000,001 – $5,000,000	XI Over $5,000,000	P, S, E
	Normandy Chateau, Residential Rental Apts., 1506 Highland Dr., Knoxville, TN, 6.6% partnership int.				X										X										X*		X**				
	Ridgeview Apts., Residential Rental, Rt. 2 Jefferson City, TN; 25% partnership interest					X									X	X					X*			X			X**				
	Robinson Property II, 23 acres located on Pellissippi Pkwy., Knoxville, TN; 7% partnership interest					X															X										

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*net income **gross income

SCHEDULE III — ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Name: ROBERT (BOB) N. CLEMENT

SP, DC, JT	BLOCK A: Asset and/or Income Source	BLOCK B: Year-End Value of Asset — A: None	B: $1 – $1,000	C: $1,001 – $15,000	D: $15,001 – $50,000	E: $50,001 – $100,000	F: $100,001 – $250,000	G: $250,001 – $500,000	H: $500,001 – $1,000,000	I: $1,000,001 – $5,000,000	J: $5,000,001 – $25,000,000	K: $25,000,001 – $50,000,000	L: Over $50,000,000	BLOCK C: Type of Income — DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Type of Income (Specify)	BLOCK D: Amount of Income — I: None	II: $1 – $200	III: $201 – $1,000	IV: $1,001 – $2,500	V: $2,501 – $5,000	VI: $5,001 – $15,000	VII: $15,001 – $50,000	VIII: $50,001 – $100,000	IX: $100,001 – $1,000,000	X: $1,000,001 – $5,000,000	XI: Over $5,000,000	BLOCK E: Transaction — P, S, E
	IRA's - Merrill Lynch:																																
	Morgan Stanley			X												X						X											
	Eaton Vance Prime Trust			X												X																	
	M/L Retirement Reserve			X										X									X										
	Wilson Bank & Trust				X									X										X									
	Columbia/HCA	X												X									X										S
	Republic Auto Parts			X																	X												
SP	M/L Retirement Fund		X											X									X										
SP	Home Depot			X										X									X										
	Cracker Barrel			X										X									X										
	Gaylord Entertainment			X										X									X										
SP	ICC Technologies		X																		X												
	ICC Technologies		X																		X												S
	Wainco Oil Corp	X																			X												
	Community Financial Group			X																	X												
SP	American Freightways			X																	X												
	American Freightways			X																	X												
	Greyhound Lines Inc			X																	X												
	Calif Micro Devices Corp	X																			X												S
	Geneva Steel Co			X																	X												
	Southwest Airlines			X										X								X											

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SCHEDULE III — ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Name: ROBERT (BOB) N. CLEMENT

SP DC JT	BLOCK A Asset and/or Income Source	BLOCK B Year-End Value of Asset											BLOCK C Type of Income							BLOCK D Amount of Income										BLOCK E Transaction
		A None	B $1 – $1,000	C $1,001 – $15,000	D $15,001 – $50,000	E $50,001 – $100,000	F $100,001 – $250,000	G $250,001 – $500,000	H $500,001 – $1,000,000	I $1,000,001 – $5,000,000	J $5,000,001 – $25,000,000	K $25,000,001 – $50,000,000	L Over $50,000,000	DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Type of Income (Specify)	I None	II $1 – $200	III $201 – $1,000	IV $1,001 – $2,500	V $2,501 – $5,000	VI $5,001 – $15,000	VII $15,001 – $50,000	VIII $50,001 – $100,000	IX $100,001 – $1,000,000	X $1,000,001 – $5,000,000	XI Over $5,000,000	P S E
	IRA's - Merrill Lynch: (continued)																													
	Sun Micro Systems			X																	X									P
	World Com Inc			X																	X									P
	1st TN Nat'l Corp			X										X								X								P
	Gaylord Entertainment (194 shares)	X																				X								E
	Westinghouse	X																				X								E
	CBS			X																	X									E

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SCHEDULE III — ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Name ROBERT (BOB) N. CLEMENT | Page 8 of 13

SP. OC. JT	BLOCK A Asset and/or Income Source	BLOCK B Year-End Value of Asset: A None	B $1 – $1,000	C $1,001 – $15,000	D $15,001 – $50,000	E $50,001 – $100,000	F $100,001 – $250,000	G $250,001 – $500,000	H $500,001 – $1,000,000	I $1,000,001 – $5,000,000	J $5,000,001 – $25,000,000	K $25,000,001 – $50,000,000	L Over $50,000,000	BLOCK C Type of Income: DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Type of Income (Specify)	BLOCK D Amount of Income: I None	II $1 – $200	III $201 – $1,000	IV $1,001 – $2,500	V $2,501 – $5,000	VI $5,001 – $15,000	VII $15,001 – $50,000	VIII $50,001 – $100,000	IX $100,001 – $1,000,000	X $1,000,001 – $5,000,000	XI Over $5,000,000	BLOCK E Transaction: P. S. E
	Wright Patman Credit Union Washington, DC			X												X								X								
	Health Care Products Nash, TN, investment			X																	X											
DC	Prudential Equity Income Fund: Class A			X										X									X									
	Premier Bank, Brentwood, TN Common Stock			X																	X											
	US Life Corp Common Stock	X												X								X										E
	American General Common Stock			X										X								X											E
	Condominium, 672 Timber Lane, Nashville, TN 1/2 interest	X																		Sale of inherited property with no capital gains								X				S
	Meager Means Investment Club, Arlington, VA, 4.76% interest			X												X		X				X		X								
	Plymouth Haven Church Bonds			X																	X											P

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SCHEDULE III — ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Name: ROBERT (BOB) N. CLEMENT

BLOCK A	BLOCK B												BLOCK C								BLOCK D											BLOCK E
Asset and/or Income Source	Year-End Value of Asset												Type of Income								Amount of Income											Transaction
SP DC JT	A	B	C	D	E	F	G	H	I	J	K	L									I	II	III	IV	V	VI	VII	VIII	IX	X	XI	
	None	$1 – $1,000	$1,001 – $15,000	$15,001 – $50,000	$50,001 – $100,000	$100,001 – $250,000	$250,001 – $500,000	$500,001 – $1,000,000	$1,000,001 – $5,000,000	$5,000,001 – $25,000,000	$25,000,001 – $50,000,000	Over $50,000,000	DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Type of Income (Specify)		None	$1 – $200	$201 – $1,000	$1,001 – $2,500	$2,501 – $5,000	$5,001 – $15,000	$15,001 – $50,000	$50,001 – $100,000	$100,001 – $1,000,000	$1,000,001 – $5,000,000	Over $5,000,000	P S E
	Rental Property																															
	11212-Front-Beach-Rd. Windward #601 Panama City Beach, FL					X								X									X										inherited
	Note-Receivable O.L. Gonzales					X									X								X										inherited
	Note Receivable Bill Castleman			X											X								X										inherited
	First Union Bank, Nashville				X										X							X											inherited
	Bank of Nashville Nashville, TN			X											X							X											inherited
DC	Bank of Nashville Nashville, TN				X																X												inherited
	J.C.Bradford Money Market Fund		X										X										X										
	Vanguard Securities Fund GNMA					X							X											X									P

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SCHEDULE IV — TRANSACTIONS

Report any purchase, sale, or exchange by you, your spouse, or dependent child during the reporting year of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child, or the purchase or sale of your personal residence, unless it is rented out.

SP, DC, JT	Asset	Type of Transaction: PURCHASE	SALE	EXCHANGE	Date (MO/DAY/YR)	Amount of Transaction: B $1,001–$15,000	C $15,001–$50,000	D $50,001–$100,000	E $100,001–$250,000	F $250,001–$500,000	G $500,001–$1,000,000	H $1,000,001–$5,000,000	I $5,000,001–$25,000,000	J $25,000,001–$50,000,000	K Over $50,000,000
SP	*Example:* Mega Corporation Common Stock	X			10-12-97		X								
	Condominium, 672 Timber Ln, Nash, TN 1/2 int.		X		3-17-97			X							
	1st TN Nat'l Corp	X			4-16-97	X									
	Columbia/HCA Health Care		X		4-16-97	X									
	Plymouth Haven Church Bonds	X			6-11-97	X									
	US Life Corp			X	6-18-97	X									
	American General			X	6-18-97	X									
	Calif Micro Devices		X		10-31-97	X									
	Sun Microsystems Inc	X			10-31-97	X									
	Wainco Oil Corp		X		10-31-97	X									
	Columbia/HCA Health Care		X		11-12-97	X									
	World Com Inc GA	X			11-12-97	X									
	Gaylord Entertainment			X	10-6-97	X									
	Westinghouse (exchanged for Gaylord Ent.)			X	10-6-97	X									
	Westinghouse			X	12-2-97	X									
	CBS (exchanged for Westinghouse)			X	12-2-97	X									
	Vanguard Securities Fund-GNMA	X			5-5-97		X								

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SCHEDULE VII —TRAVEL PAYMENTS AND REIMBURSEMENTS

Identify the source and list travel itinerary, dates, and nature of expenses provided for travel and travel-related expenses totalling more than $250 received by you, your spouse, or a dependent child during the reporting period. Indicate whether a family member accompanied the traveler at the sponsor's expense, and the amount of time, if any, that was not at the sponsor's expense. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor.

Exclude: Travel-related expenses provided by federal, state, and local governments, or by a foreign government required to be separately reported under the Foreign Gifts and Decorations Act (5 U.S.C. § 7342); travel paid for by a Federal political committee; travel provided to a spouse or dependent child that is totally independent of his or her relationship to you.

Source	Date(s)	Point of Departure—Destination—Point of Return	Lodging? (Y/N)	Food? (Y/N)	Was a Family Member Included? (Y/N)	Any time not at sponsor's expense
Examples: Chicago Chamber of Commerce	Mar. 2	Wash., D.C.—Chicago—Wash., D.C.	N	N	N	N
Roycroft Corporation	Aug. 6–13	Wash., D.C.—Los Angeles—Cleveland	Y	Y	Y	4 Days
The Aspen Institute	Mar 7-9	Wash.,,D.C.-Hershey,PA-DC	Y	Y	Y	N

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SCHEDULE VIII — POSITIONS

Report all positions, compensated or uncompensated, held during the current calendar year as an officer, director, trustee of an organization, partner, proprietor, representative, employee, or consultant of any corporation, firm, partnership, or other business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States

Exclude: Positions held in any religious, social, fraternal, or political entities, positions solely of an honorary nature; and positions listed on Schedule I

Position	Name of Organization
Partner	Robinson Property II Ltd
Partner	Normandy Chateau
Partner	Ridgeview Apartments
Partner	RSC Investments
Partner	Forrest Hills Development
Partner	Haybelle G. Clement Investments

SCHEDULE IX — AGREEMENTS

Identify the date, parties to, and general terms of any agreement or arrangement with respect to: future employment; a leave of absence during the period of government service; continuation or deferral of payments by a former or current employer other than the U.S. Government, or continuing participation in an employee welfare or benefit plan maintained by a former employer

Date	Parties To	Terms of Agreement

GPO 1998 46-200 (mac)

Use additional sheets if more space is required.

SCHEDULE VIII — POSITIONS

Report all positions, compensated or uncompensated, held during the current calendar year as an officer, director, trustee of an organization, partner, proprietor, representative, employee, or consultant of any corporation, firm, partnership, or other business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States.

Exclude: Positions held in any religious, social, fraternal, or political entities; positions solely of an honorary nature; and positions listed on Schedule I.

Position	Name of Organization
Board Member	Board of Trust, Cumberland University
Board Member	Washington Symphony Orchestra

SCHEDULE IX — AGREEMENTS

Identify the date, parties to, and general terms of any agreement or arrangement with respect to: future employment; a leave of absence during the period of government service; continuation or deferral of payments by a former or current employer other than the U.S. Government; or continuing participation in an employee welfare or benefit plan maintained by a former employer.

Date	Parties To	Terms of Agreement

GPO 1998 46-260 (mac)

Use additional sheets if more space is required.

98 MAY 14 PM 1:08

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1997

Form A
For use by Members, officers, and employees

James E. Clyburn
(Full Name)

1703 Gervais Street
(Mailing Address)

Columbia SC 29201
Daytime Telephone 803-799-1100

(8)
(Office Use Only)

Filer Status: [X] Member of the U S House of Representatives — State SC, District 06 — [ ] Officer or Employee — Employing Office.

Report Type: [X] Annual (May 15) — [ ] Amendment — [ ] Termination — Termination Date

A $200 penalty shall be assessed against anyone who files more than 30 days late.

PRELIMINARY INFORMATION -- ANSWER EACH OF THESE QUESTIONS

I. Did you or your spouse have "earned" income (e g , salaries or fees) of $200 or more from any source in the reporting period?
If yes, complete and attach Schedule I. Yes [X] No [ ]

II Did any individual or organization make a donation to charity in lieu of paying you for a speech, apppearance, or article in the reporting period?
If yes, complete and attach Schedule II. Yes [X] No [ ]

III Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period?
If yes, complete and attach Schedule III. Yes [X] No [ ]

IV Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset worth more than $1,000 in the reporting period?
If yes, complete and attach Schedule IV. Yes [ ] No [X]

V Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period?
If yes, complete and attach Schedule V. Yes [X] No [ ]

VI Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i e , aggregating more than $250 and not otherwise exempt)?
If yes, complete and attach Schedule VI. Yes [ ] No [X]

VII Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $250 from one source)?
If yes, complete and attach Schedule VII. Yes [X] No [ ]

VIII Did you hold any reportable positions on or before the date of filing in the current calendar year?
If yes, complete and attach Schedule VIII. Yes [X] No [ ]

IX Did you have any reportable agreement or arrangement with an outside entity?
If yes, complete and attach Schedule IX. Yes [ ] No [X]

Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION -- ANSWER EACH OF THESE QUESTIONS

TRUSTS- Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child? (See Instructions, pages 10-11.) Yes [ ] No [X]

EXEMPTION Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption? (See Instructions, page 11) Yes [ ] No [X]

CERTIFICATION -- THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended. The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct or its designee. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil penalties and criminal sanctions (See 5 U.S.C. app. 4, 104 and 18 U.S.C. 1001)

SIGNATURE OF REPORTING INDIVIDUAL — DATE (Month/Day/Year)

James E. Clyburn — May 14, 1998

664

SCHEDULE I -- EARNED INCOME

List the source, type, and amount of earned income from any source (other than the filer's current employment by the U.S. Government) totalling $200 or more during the preceding calendar year. For a spouse, list the source and amount of any honoraria, list only the source for other spouse earned income exceeding $1,000. For further information, see instructions, pages 12-13.

	Source	Type	Amount
Examples:	Keene State	Approved Teaching Fee	$10,000
	State of Maryland	Legislative Pension	$9,000
	Civil War Roundtable (Oct. 2nd)	Spouse Speech	$1,000
	Ontario County Board of Education	Spouse Salary	NA
	South Carolina Retirement System (This income is not subject to the outside earned income limit.)	Retirement from the State of South Carolina	$50,100.00
	U.S. Department of Veterans Affairs	Retirement Income	NA

For payments to charity in lieu of honoraria, use Schedule II.

SCHEDULE II -- PAYMENTS IN LIEU OF HONORARIA MADE TO CHARITY

List the source, activity (i.e., speech, appearance, or article), date, and amount of any payment made by the sponsor of an event to a charitable organization in lieu of an honorarium. A separate confidential list of charities receiving such payments must be filed directly with the Committe on Standards of Official Conduct. An envelope for transmitting the list is included in each Member's filing package. For further information, see instructions, pages 13-14.

Source	Activity	Date	Amount
Examples: Association of American Associations, Wash., D.C.	Speech	Feb. 2, 1994	$2,000
XYZ Magazine	Article	Aug. 13, 1994	$500
Jehovah Missionary Baptist Church	Speech	2/2/97	$200.00
St. Paul AME Church	Speech	4/27/97	$200.00
Greenville Urban League	Speech	5/1/97	$1,000.00
Jerusalem Baptist Church	Speech	6/8/97	$100.00
Liberty Hill Baptist Church	Speech	9/20/97	$150.00
Zion Baptist Church	Speech	10/26/97	$250.00
Marlboro County NAACP	Speech	11/14/97	$350.00

SCHEDULE III -- ASSETS AND "UNEARNED" INCOME

	BLOCK A **Asset and/or Income Source** Identify (a) each asset held for investment or production of income with a fair market value exceeding $1,000 at the end of the reporting year, and (b) any other asset or source of income which generated more than $200 in "unearned" income during the year. For rental property or land, provide an address. Provide full names of any mutual funds. For an IRA or retirement plan that is *self-directed*, list the underlying assets worth more than $1,000. For an IRA or retirement plan that is *not* self-directed, name the institution holding the account. **Exclude:** Your personal residence(s) (unless there is rental income); any debt owed to you by your spouse, or by your or your spouse's child, parent, or sibling; any deposits totalling $5,000 or less in personal savings accounts; any financial interests in or income derived from U.S. Government retirement programs. If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC) or is jointly held (JT), in the optional column on the far left For further information, see instructions, pages 14-20	BLOCK B **Value of Asset** at close of reporting year If you use a valuation method other than fair market value, please specify the method used If an asset was sold and is included only because it generated income, the value should be "None."	BLOCK C **Type of Income** If other than one of the listed categories, specify the type of income by writing a brief description in this block	BLOCK D **Amount of Income** For IRA's and retirement plans that are *not* self-directed, you may write in "NA" for income	BLOCK E **Transaction** Indicate if asset was purchased(P), sold(S), or exchanged(E) in reporting year
SP DC *Examples* JT	SP Mega Corp. Stock 123 Main St., Dover, Del 1st Bank of Paducah, KY accounts	$15,001 - $50,000 $250,001 - $500,000 $50,001 - $100,000	Dividends Rent Interest	$201 - $1,000 $1,001 - $2,500 $5,001 - $15,000	P
	Fort Jackson Federal Credit Union	$1 - $1,000	Interest	$1 - $200	
	S.C. State Credit Union	$1 - $1,000	Interest	$1 - $200	
	Nations Bank	$1,001 - $15,000	Interest	$1 - $200	
	SCANA Corporation	$1,001 - $15,000	Dividends	$1,001 - $2,500	
	Automated Data Processing, Inc	$1,001 - $15,000	Dividends	$1 - $200	
SP	Nations Bank	$15,001 - $50,000	Dividends	$201 - $1,000	
SP	417 & 419 Juniper Street, Columbia, SC	$15,001 - $50,000	Rent	$2,501 - $5,000	
	9 Dunbar Street, Myrtle Beach, SC	$15,001 - $50,000	Rent	$1,001 - $2,500	

SCHEDULE III -- ASSETS AND "UNEARNED" INCOME

	645-47 W. Liberty Street, Sumter, SC (50% ownership)	$50,001 - $100,000	Rent	$2,501 - $5,000	
	Nations Bank, Columbia, SC (IRA)	$15,001 - $50,000	IRA	None	
	Merrill Lynch, Columbia, SC (IRA)	$1,001 - $15,000	IRA	None	

SCHEDULE V -- LIABILITIES

Report liabilities of over $10,000 owed to any one creditor ***at any time*** during the reporting period by you, your spouse, or dependent child Mark the highest amount owed during the year
Exclude: Any mortgage on your personal residence (unless it is rented out); loans secured by automobiles, household furniture, or appliances, and liabilities owed to a spouse, or the child, parent, or sibling of you or your spouse. Report ***revolving charge accounts*** only if the balance at the end of the reporting period exceeded $10,000 For further information, see Instructions, pages 21-22.

SP,DC,JT	Creditor	Type of Liability	Amount of Liability
	Example: First Bank of Wilmington, Delaware	Mortgage on 123 Main St., Dover, Del	$100,001 - $250,000
	Temple-Inland	Mortgage on 417 Juniper Street, Columbia, SC .	$15,001 - $50,000
	Countrywide Funding, Van Nuys, CA	Mortgage on 9 Dunbar Street, Myrtle Beach, SC and 609 Santee Drive, Santee, SC	$100,001 - $250,000
	NBSC Columbia, SC	Mortgage on 645-47 W. Liberty Street, Sumter, SC (50% interest)	$50,001 - $100,000

SCHEDULE VII -- TRAVEL PAYMENTS AND REIMBURSEMENTS

Identify the source and list travel itinerary, dates, and nature of expenses provided for travel and travel-related expenses totalling more than $250 received by you, your spouse, or a dependent child during the reporting period. Indicate whether a family member accompanied the traveler at the sponsor's expense, and the amount of time, if any, that was not at the sponsor's expense. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor.
Exclude: Travel-related expenses provided by federal, state and local governments, or by a foreign government required to be separately reported under the Foreign Gifts and Decorations Act (5 U.S.C. 7342); travel paid for by a Federal political committee; travel provided to a spouse or dependent child that is totally independent of his or her relationship to you. For further information, see Instructions, pages 24-26

Source	Date(s)	Point of Departure--Destination--Point of Return	Lodging? (Y/N)	Food? (Y/N)	Was a Family Member Included? (Y/N)	Any time not at sponsor's expense
Examples Chicago Chamber of Commerce	Mar 2	Wash., D.C.-Chicago-Wash., D.C.	N	N	N	N
Mega Corporation	Aug 6-13	Wash., D.C.-Los Angeles-Cleveland	Y	Y	Y	4 Days
National Security Caucus	1/28/97 - 2/1/97	Columbia, SC - Guam - Columbia, SC	Y	Y	N	n/a
Tobacco Institute	2/13/97 - 2/15/97	Columbia, SC - Scottsdale, AZ - Columbia, SC	Y	Y	Y	n/a
Artic Power	8/24/97 - 8/28/97	Columbia, SC - Anchorage, AL - Columbia, SC	Y	Y	N	n/a

SCHEDULE VIII -- POSITIONS

Report all positions, compensated or uncompensated, held during the current calendar year as an officer, director, trustee of an organization, partner, proprietor, representative, employee, or consultant of any corporation, firm, partnership, or other business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States. For further information, see Instructions, page 26.

Exclude: Positions held in any religious, social, fraternal, or political entities, positions solely of an honorary nature, and positions listed on Schedule I

Position	Organization
Publisher Emeritus	Coastal Times, Inc.
Board Member	Wofford College
Board Member	Allen University
Trustee	Brookgreen Gardens
Council Member	Jaguar Advisory Council on Diversity

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CLERK OF THE HOUSE OF REPRESENTATIVES

(Office Use Only)

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1997

Form A
For use by Members, officers, and employees

John Howard Coble
(Full Name)

5741-L Brahblegate Road
(Mailing Address)

Greensboro NC 27409

Daytime Telephone
202.225.3065

Filer Status
[X] Member of the U S House of Representatives — State NC, District 06
[ ] Officer or Employee — Employing Office

Report Type
[X] Annual (May 15)
[ ] Amendment
[ ] Termination — Termination Date

A $200 penalty shall be assessed against anyone who files more than 30 days late.

PRELIMINARY INFORMATION -- ANSWER EACH OF THESE QUESTIONS

I Did you or your spouse have "earned" income (e g , salaries or fees) of $200 or more from any source in the reporting period?
If yes, complete and attach Schedule I. Yes [ ] No [X]

II Did any individual or organization make a donation to charity in lieu of paying you for a speech, apppearance, or article in the reporting period?
If yes, complete and attach Schedule II. Yes [X] No [ ]

III Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period?
If yes, complete and attach Schedule III. Yes [X] No [ ]

IV Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset worth more than $1,000 in the reporting period?
If yes, complete and attach Schedule IV. Yes [X] No [ ]

V Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period?
If yes, complete and attach Schedule V. Yes [ ] No [X]

VI Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i e , aggregating more than $250 and not otherwise exempt)?
If yes, complete and attach Schedule VI. Yes [ ] No [X]

VII Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $250 from one source)?
If yes, complete and attach Schedule VII. Yes [X] No [ ]

VIII Did you hold any reportable positions on or before the date of filing in the current calendar year?
If yes, complete and attach Schedule VIII. Yes [X] No [ ]

IX Did you have any reportable agreement or arrangement with an outside entity?
If yes, complete and attach Schedule IX. Yes [ ] No [X]

Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION -- ANSWER EACH OF THESE QUESTIONS

TRUSTS--Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child? (See Instructions, pages 10-11) Yes [ ] No [X]

EXEMPTION Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption? (See Instructions, page 11) Yes [ ] No [X]

CERTIFICATION -- THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct or its designee Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil penalties and criminal sanctions (See 5 U S C. app. 4, 104 and 18 U S C 1001)

SIGNATURE OF REPORTING INDIVIDUAL John Howard Coble

DATE (Month/Day/Year) 5-14-98

672

SCHEDULE II -- PAYMENTS IN LIEU OF HONORARIA MADE TO CHARITY

List the source, activity (i e , speech, appearance, or article), date, and amount of any payment made by the sponsor of an event to a charitable organization in lieu of an honorarium.
A separate confidential list of charities receiving such payments must be filed directly with the Committe on Standards of Official Conduct. An envelope for transmitting the list is included in each Member's filing package. For further information, see Instructions, pages 13-14.

Source	Activity	Date	Amount
Examples: Association of American Associations, Wash., D.C. XYZ Magazine	Speech Article	Feb. 2, 1994 Aug. 13, 1994	$2,000 $500
Philip Morris Management Corporation	Speech and tour in Richmond, VA	Aug. 25, 1997	$2,000.00
Kmart Corporation	Attend anti-drug rally in DC	Sept. 10, 1997	$500.00

SCHEDULE III -- ASSETS AND "UNEARNED" INCOME

	BLOCK A **Asset and/or Income Source** Identify (a) each asset held for investment or production of income with a fair market value exceeding $1,000 at the end of the reporting year, and (b) any other asset or source of income which generated more than $200 in "unearned" income during the year. For rental property or land, provide an address. Provide full names of any mutual funds. For an IRA or retirement plan that is *self-directed,* list the underlying assets worth more than $1,000. For an IRA or retirement plan that is *not* self-directed, name the institution holding the account **Exclude:** Your personal residence(s) (unless there is rental income); any debt owed to you by your spouse, or by your or your spouse's child, parent, or sibling; any deposits totalling $5,000 or less in personal savings accounts; any financial interests in or income derived from U.S. Government retirement programs If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC) or is jointly held (JT), in the optional column on the far left For further information, see Instructions, pages 14-20	BLOCK B **Value of Asset** at close of reporting year If you use a valuation method other than fair market value, please specify the method used If an asset was sold and is included only because it generated income, the value should be "None"	BLOCK C **Type of Income** If other than one of the listed categories, specify the type of income by writing a brief description in this block	BLOCK D **Amount of Income** For IRA's and retirement plans that are *not* self-directed, you may write in "NA" for income	BLOCK E **Transaction** Indicate if asset was purchased(P), sold(S), or exchanged(E) in reporting year
SP, DC, JT	*Examples* SP	Mega Corp Stock 123 Main St , Dover, Del 1st Bank of Paducah, KY accounts	$15,001 - $50,000 $250,001 - $500,000 $50,001 - $100,000	Dividends Rent Interest	$201 - $1,000 $1,001 - $2,500 $5,001 - $15,000	P
	Food Ljon Common Stock	$1,001 - $15,000	Dividends	$201 - $1,000	
	Wal Mart Common Stock	$1,001 - $15,000	Dividends	$1 - $200	
	Toys R Us Common Stock	$1,001 - $15,000	Dividends	None	
	GTE Common Stock	$1,001 - $15,000	Dividends	$1 - $200	
	Ryan's Steak House Common Stock	$1,001 - $15,000	Dividends	None	S
	Lance, Inc. Common Stock	$1,001 - $15,000	Dividends	$1 - $200	
	Horizon/CMS Healthcare Common Stock	$1,001 - $15,000	Dividends	None	S

SCHEDULE III -- ASSETS AND "UNEARNED" INCOME

	Aim Constellation Mutual Fund	$1,001 - $15,000	Dividends	$1 - $200	
	Davis NY Venture Mutual Fund	$1,001 - $15,000	Dividends	$1 - $200	
	Central Carolina Bank Savings Account	$1,001 - $15,000	Interest	$201 - $1,000	
	First Union Bank Checking Account	$1,001 - $15,000	Interest	$1 - $200	
	BBT Savings Bank Savings Account	$50,001 - $100,000	Interest	$5,001 - $15,000	
	Wright Patman Credit Union Savings Acct.	$50,001 - $100,000	Interest	$2,501 - $5,000	
	First Citizens Bank Savings Account	$15,001 - $50,000	Interest	$1,001 - $2,500	
	NationsBank Checking Account	$1,001 - $15,000	Interest	$1 - $200	
	Bank of North Carolina Stock Certificate	$1,001 - $15,000	Dividends	$1 - $200	
	Jefferson-Pilot Fixed Annuity	$15,001 - $50,000	Dividends	$2,501 - $5,000	
	Jefferson-Pilot Variable Annuity	$1,001 - $15,000	Dividends	$1,001 - $2,500	
	Allmerica Insurance Annuity	$15,001 - $50,000	Dividends	$2,501 - $5,000	
	General American Insurance Annuity	$1,001 - $15,000	Dividends	$201 - $1,000	
	Western National Insurance Annuity	$1,001 - $15,000	Dividends	$201 - $1,000	
	MassMutual Insurance Annuity	$1,001 - $15,000	Dividends	$201 - $1,000	
	Wachovia N.C. Memorial Hospital Bond	$1,001 - $15,000	Dividends	$1 - $200	S
	State Employees Credit Union Savings Acct.	$15,001 - $50,000	Interest	$201 - $1,000	
	Merrill Lynch Cash Management Account	$1,001 - $15,000	Interest	$1 - $200	
	Merrill Lynch IRA	$1,001 - $15,000	Dividends	$1,001 - $2,500	
	RJR Nabisco Common Stock	$1,001 - $15,000	Dividends	$1 - $200	

SCHEDULE III -- ASSETS AND "UNEARNED" INCOME

	First Citizens IRA	$1,001 - $15,000	Dividends	$1 - $200	
	MassMutual Insurance Annuity	$1,001 - $15,000	Dividends	$1,001 - $2,500	P
	House and one acre, Blowing Rock, NC	$50,001 - $100,000	NA	None	NA
	78 acre farm, Henry County, VA	$50,001 - $100,000	NA	None	NA

SCHEDULE IV -- TRANSACTIONS

Report any purchase, sale, or exchange by you, your spouse, or dependent child during the reporting year of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child, or the purchase or sale of your personal residence, unless it is rented out. For further information, see Instructions, pages 20-21.

SP,DC,JT	Asset	Type of Transaction	Date	Amount of Transaction
	Example: Mega Corporation Common Stock	Purchase	10/12/94	$15,001 - $50,000
	Ryan's Steak House Common Stock	Sold	10.10.97	$1,001 - $15,000
	Horizon/CMS Healthcare Common Stock	Sold	10.10.97	$1,001 - $15,000
	MassMutual Insurance Annuity	Purchase	3.25.97	$1,001 - $15,000
	Wachovia N.C. Memorial Hospital Bond	Sold	2.18 97	$1,001 - $15,000

SCHEDULE VII -- TRAVEL PAYMENTS AND REIMBURSEMENTS

Identify the source and list travel itinerary, dates, and nature of expenses provided for travel and travel-related expenses totalling more than $250 received by you, your spouse, or a dependent child during the reporting period. Indicate whether a family member accompanied the traveler at the sponsor's expense, and the amount of time, if any, that was not at the sponsor's expense. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor.
Exclude: Travel-related expenses provided by federal, state and local governments, or by a foreign government required to be separately reported under the Foreign Gifts and Decorations Act (5 U.S.C. 7342), travel paid for by a Federal political committee, travel provided to a spouse or dependent child that is totally independent of his or her relationship to you. For further information, see Instructions, pages 24-26.

Source	Date(s)	Point of Departure--Destination--Point of Return	Lodging? (Y/N)	Food? (Y/N)	Was a Family Member Included? (Y/N)	Any time not at sponsor's expense
Examples Chicago Chamber of Commerce	Mar 2	Wash., D.C.-Chicago-Wash., D.C.	N	N	N	N
Mega Corporation	Aug 6-13	Wash., D.C.-Los Angeles-Cleveland	Y	Y	Y	4 Days
National Security Caucus Foundation	Jan. 22-29	DC--Pakistan--India--DC	Y	Y	N	N
Tobacco Institute	Feb. 13-16	DC-Arizona-DC	Y	Y	N	N
American Intellectual Property Law Assoc.	Mar. 7-12	DC-England-DC	Y	Y	N	N
National Association of Broadcasters	Aug. 6-9	NC-Austria-Hungary	Y	Y	N	N
Ripon Educational Fund	Aug. 9-16	Hungary-Czech Republic-NC	Y	Y	N	N
American Crop Protection Association	Sept. 26-28	DC-W.Virginia-DC	Y	Y	N	N
US Patent & Trademark Office	Oct. 1-6	DC-Spain-Italy-DC	Y	Y	N	N

SCHEDULE VIII -- POSITIONS

Report all positions, compensated or uncompensated, held during the current calendar year as an officer, director, trustee of an organization, partner, proprietor, representative, employee, or consultant of any corporation, firm, partnership, or other business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States. For further information, see instructions, page 26

Exclude: Positions held in any religious, social, fraternal, or political entities, positions solely of an honorary nature, and positions listed on Schedule I

Position	Organization
Member, Board of Vistors	Guilford College, Greensboro, NC
Member, Board of Associates	Greensboro College, Greensboro, NC
Member, Congressional Advisory Board	Congressional Youth Leadership, Washington, DC
Member, National Advisory Board	Jefferson Educational Foundation, Washington, DC
Member, Congressional Board of Advisors	Common Sense, Inc., Stafford, VA
Honorary Chairman	Jefferson Islands Club, Washington, DC
Member, Congressional Advisory Board	India Abroad Center for Political Awareness, Washington, DC
Member, Congressional Board of Advisors	Close Up Foundation, Washington, DC

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1997

Form A
For use by Members, officers, and employees

98 MAY 22 AM 11:16

OFFICE OF THE CLERK
U.S. HOUSE OF REPRESENTATIVES

MAY 15 1998
(Office Use Only)

15

Thomas A Coburn
(Full Name)

5409 Rolling Oaks
(Mailing Address)

Muskogee OK 74401

Daytime Telephone
(918) 687-2533

Filer Status	[X] Member of the U.S. House of Representatives	State OK District 02	[ ] Officer or Employee	Employing Office	
Report Type	[X] Annual (May 15)	[ ] Amendment	[ ] Termination	Termination Date	

A $200 penalty shall be assessed against anyone who files more than 30 days late.

PRELIMINARY INFORMATION -- ANSWER EACH OF THESE QUESTIONS

I. Did you or your spouse have "earned" income (e.g., salaries or fees) of $200 or more from any source in the reporting period? If yes, complete and attach Schedule I. Yes [X] No [ ]

II. Did any individual or organization make a donation to charity in lieu of paying you for a speech, apppearance or article in the reporting period? If yes, complete and attach Schedule II Yes [X] No [ ]

III. Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? If yes, complete and attach Schedule III Yes [X] No [ ]

IV. Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset worth more than $1,000 in the reporting period? If yes, complete and attach Schedule IV. Yes [X] No [ ]

V. Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? If yes, complete and attach Schedule V. Yes [ ] No [X]

VI. Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $250 and not otherwise exempt)? If yes, complete and attach Schedule VI Yes [ ] No [X]

VII. Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $250 from one source)? If yes, complete and attach Schedule VII Yes [X] No [ ]

VIII. Did you hold any reportable positions on or before the date of filing in the current calendar year? If yes, complete and attach Schedule VIII Yes [X] No [ ]

IX. Did you have any reportable agreement or arrangement with an outside entity? If yes, complete and attach Schedule IX Yes [X] No [ ]

Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION -- ANSWER EACH OF THESE QUESTIONS

TRUSTS- Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child? (See Instructions, pages 10-11.) Yes [ ] No [X]

EXEMPTION- Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption? (See Instructions, page 11.) Yes [ ] No [X]

CERTIFICATION -- THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended. The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct or its designee. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil penalties and criminal sanctions (See 5 U.S.C. app. 4, 104 and 18 U.S.C. 1001)

SIGNATURE OF REPORTING INDIVIDUAL

DATE (Month/Day/Year) 5-15-98

SCHEDULE I -- EARNED INCOME

List the source, type, and amount of earned income from any source (other than the filer's current employment by the U.S. Government) totalling $200 or more during the preceding calendar year. For a spouse, list the source and amount of any honoraria; list only the source for other spouse earned income exceeding $1,000. For further information, see Instructions, pages 12-13.

	Source	Type	Amount
	Keene State	Approved Teaching Fee	$10,000
	State of Maryland	Legislative Pension	$9,000
Examples:	Civil War Roundtable (Oct 2nd)	Spouse Speech	$1,000
	Ontario County Board of Education	Spouse Salary	NA
	Thomas A Coburn, MD, Inc	Salary	4000
	Thomas A Coburn, MD, Inc	S-Corp Loss	-8200
	Muskogee Allergy Clinic Partnership	Partnership Income	12600

For payments to charity in lieu of honoraria, use Schedule II.

SCHEDULE II -- PAYMENTS IN LIEU OF HONORARIA MADE TO CHARITY

List the source, activity (i e , speech, appearance, or article), date, and amount of any payment made by the sponsor of an event to a charitable organization in lieu of an honorarium
A separate confidential list of charities receiving such payments must be filed directly with the Committe on Standards of Official Conduct An envelope for transmitting the list is included in each Member's filing package For further information, see Instructions, pages 13-14

	Source	Activity	Date	Amount
Examples	Association of American Associations, Wash , D C	Speech	Feb 2, 1994	$2 000
	XYZ Magazine	Article	Aug 13, 1994	$500
The State Chamber		Habitat for Humanity	10/1/97	$ 500

SCHEDULE III -- ASSETS AND "UNEARNED" INCOME

BLOCK A **Asset and/or Income Source** Identify (a) each asset held for investment or production of income with a fair market value exceeding $1,000 at the end of the reporting year, and (b) any other asset or source of income which generated more than $200 in "unearned" income during the year. For rental property or land, provide an address. Provide full names of any mutual funds. For an IRA or retirement plan that is *self-directed*, list the underlying assets worth more than $1,000. For an IRA or retirement plan that is *not* self-directed, name the institution holding the account **Exclude:** Your personal residence(s) (unless there is rental income); any debt owed to you by your spouse, or by your or your spouse's child, parent, or sibling; any deposits totalling $5,000 or less in personal savings accounts; any financial interests in or income derived from U.S. Government retirement programs If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC) or is jointly held (JT), in the optional column on the far left For further information, see instructions, pages 14-20	BLOCK B **Value of Asset** at close of reporting year If you use a valuation method other than fair market value, please specify the method used. If an asset was sold and is included only because it generated income, the value should be "None"	BLOCK C **Type of Income** If other than one of the listed categories, specify the type of income by writing a brief description in this block	BLOCK D **Amount of Income** For IRA's and retirement plans that are *not* self-directed, you may write in "NA" for income	BLOCK E **Transaction** Indicate if asset was purchased(P), sold(S), or exchanged(E) in reporting year.
SP DC *Examples* JT — SP — Mega Corp Stock 123 Main St , Dover, Del 1st Bank of Paducah, KY accounts	$15,001 - $50,000 $250,001 - $500,000 $50,001 - $100,000	Dividends Rent Interest	$201 - $1,000 $1,001 - $2,500 $5,001 - $15,000	P
Congressional FCU	$1,001 - $15,000	Interest	None - $200	
Barrick Gold Corp	$15,001 - $50,000	Capital Gains and Dividends	None - $200	
Amer Gold Eagles 1 oz	$1,001 - $15,000	Capital Gains	None - $200	
Newmont Gold Co	$1,001 - $15,000	Capital Gains and Dividends	None - $200	
Placer Dome	$1,001 - $15,000	Capital Gains and Dividends	None - $200	
Alliance New Europe Fund	$1,001 - $15,000	Capital Gains and Dividends	$201 - $1,000	
Colonial Trust High Yld Secs	$15,001 - $50,000	Capital Gains and Dividends	$2,501 - $5,000	
MFS Multimarket Income Trust	$1,001 - $15,000	Dividends	$201 - $1,000	
Mentor Growth Portfolio	$15,001 - $50,000	Capital Gains	$2,501 - $5,000	

SCHEDULE III -- ASSETS AND "UNEARNED" INCOME

Putnam Capital Appreciation Fund	$1,001 - $15,000	Capital Gains and Dividends	$201 - $1,000	
Putnam Tax-Free Hi Yld Tr	$1,001 - $15,000	Dividends	$201 - $1,000	
Professional Building Partnership	$250,001 - $500,000	Rent	NA	
Plaza Medical Center Partnership	$250,001 - $500,000	Rent	$5,001 - $15,000	
Muskogee Allergy Clinic Partnership	$1,001 - $15,000	See Schedule I	NA	
Thomas A Coburn, MD, Inc	$100,001 - $250,000	See Schedule I	NA	
T&C Construction, Inc	$100,001 - $250,000	S-Corp Loss	NA	
Ranch Land, Muskogee County, Oklahoma	$250,001 - $500,000	Rent	$1,001 - $2,500	
Medical Equipment	$15,001 - $50,000	Rent	$1,001 - $2,500	
IRA-Paine Webber-cash fund	$1,001 - $15,000	Dividends	$201 - $1,000	
IRA-Edward Jones-cash fund	$1,001 - $15,000	Dividends	$201 - $1,000	NA
IRA-Edward Jones-Wal-Mart Stores, Inc	$1,001 - $15,000	Dividends	None - $200	NA
IRA-Edward Jones-Van Kampen Amer Growth Fund	$1,001 - $15,000	Capital Gains and Dividends	None - $200	NA
IRA-Edward Jones-Protective Life Annuity	$1,001 - $15,000	Capital Gains and Dividends	$201 - $1,000	NA
Profit Sharing Plan-TAC MD Inc-Kemper Horizon 20	$50,001 - $100,000	Capital Gains and Dividends	$201 - $1,000	NA
Profit Sharing Plan-TAC MD Inc-Dreman High Ret	$15,001 - $50,000	Capital Gains and Dividends	$201 - $1,000	NA
Profit Sharing Plan-TAC MD Inc-Dreman Small Cap Value	$15,001 - $50,000	Capital Gains	$201 - $1,000	NA
Anchor Natl Life Variable Annuity ***				
***SAM High Yield Bond	$1,001 - $15,000	Dividends	$1,001 - $2,500	
***AC Growth-Income	$15,001 - $50,000	Capital Gains and Dividends	$201 - $1,000	
***AC Alliance Growth	$1,001 - $15,000	Capital Gains and Dividends	None - $200	
***AC Global Equity	$1,001 - $15,000	Capital Gains and Dividends	None - $200	
***WEL Capital App	$1,001 - $15,000	Capital Gains and Dividends	$201 - $1,000	

SCHEDULE III -- ASSETS AND "UNEARNED" INCOME

	***GS Global Bond	$1,001 - $15,000	Dividends	$201 - $1,000	
	Muskogee Golf, Inc	$100,001 - $250,000	S-Corp Loss	NA	NA
	Eagle Crest Estates, Inc	$50,001 - $100,000	Dividends	None - $200	NA
	Note Receivable-Jernigan Farms	$50,001 - $100,000	Interest	$5,001 - $15,000	
SP	AC Nielsen Corp (name change)	None - $1,000	Capital Gains and Dividends	None - $200	S
SP	Amoco Corp	None - $1,000	Capital Gains and Dividends	$2,501 - $5,000	S
SP	AMR Corp	$1,001 - $15,000	Dividends	None - $200	
SP	AT&T Corp	$1,001 - $15,000	Dividends	None - $200	
SP	AVNET Inc	None - $1,000	Capital Gains and Dividends	$2,501 - $5,000	S
SP	Coastal Corp	None - $1,000	Capital Gains and Dividends	$2,501 - $5,000	S
SP	Cognizant Corp	None - $1,000	Capital Gains and Dividends	$201 - $1,000	S
SP	Compaq Computer	$1,001 - $15,000	Dividends	None - $200	
SP	Cons Papers Inc	$15,001 - $50,000	Dividends	$201 - $1,000	NA
SP	Dillard Dept Stores	None - $1,000	Capital Gains and Dividends	None - $200	S
SP	Dun & Bradstreet Corp	None - $1,000	Capital Gains and Dividends	$201 - $1,000	S
SP	Emerson Electric	None - $1,000	Capital Gains and Dividends	$2,501 - $5,000	S
SP	Federal Natl Mortgage Assoc	None - $1,000	Capital Gains and Dividends	$5,001 - $15,000	S
SP	First Union Corp	None - $1,000	Capital Gains and Dividends	$5,001 - $15,000	S
SP	Ford Motor Co	None - $1,000	Capital Gains and Dividends	$201 - $1,000	S
SP	GTE Corp	$1,001 - $15,000	Dividends	$201 - $1,000	
SP	Heinz HJ Co	None - $1,000	Capital Gains and Dividends	$2,501 - $5,000	S
SP	ITT Corp	None - $1,000	Capital Gains and Dividends	$201 - $1,000	S
SP	ITT Hartford Group	None - $1,000	Capital Gains and Dividends	$2,501 - $5,000	S
SP	ITT Industries	None - $1,000	Capital Gains and Dividends	$201 - $1,000	S
SP	Knight Ridder Inc	None - $1,000	Capital Gains and Dividends	$1,001 - $2,500	S

SCHEDULE III -- ASSETS AND "UNEARNED" INCOME

SP	Lehman Bros Holdings, Inc	None - $1,000	Capital Gains and Dividends	$1,001 - $2,500	S
SP	Lucent Technologies	None - $1,000	Capital Gains and Dividends	None - $200	S
SP	Mallinckrodt Inc	None - $1,000	Capital Gains and Dividends	$2,501 - $5,000	S
SP	Merck & Co	None - $1,000	Capital Gains and Dividends	$5,001 - $15,000	S
SP	Nationsbank Corp	None - $1,000	Capital Gains and Dividends	$2,501 - $5,000	S
SP	Oneok Inc	$15,001 - $50,000	Dividends	$201 - $1,000	NA
SP	Pitney Bowes	None - $1,000	Capital Gains and Dividends	$2,501 - $5,000	S
SP	Repsol	None - $1,000	Capital Gains and Dividends	$201 - $1,000	S
SP	Sara Lee Corp	None - $1,000	Capital Gains and Dividends	$2,501 - $5,000	S
SP	Stone Container Corp	None - $1,000	Capital Gains and Dividends	None - $200	S
SP	Telefonos De Mexico	None - $1,000	Capital Gains and Dividends	None - $200	S
SP	Textron	None - $1,000	Capital Gains and Dividends	$2,501 - $5,000	S
SP	Tyco Intl Inc	None - $1,000	Capital Gains and Dividends	$5,001 - $15,000	S
SP	United Healthcare Corp	None - $1,000	Capital Gains and Dividends	$201 - $1,000	S
SP	USX-US Steel Group	None - $1,000	Capital Gains and Dividends	None - $200	S
SP	WMX Technologies, Inc	$1,001 - $15,000	Dividends	$201 - $1,000	
SP	Grand River Dam Auth 6 8%	None - $1,000	Interest	$201 - $1,000	S
SP	Put Boatmen's Bancshares 1/97 65	None - $1,000	Capital Gains	None - $200	S
SP	Put S&P 100 Index 1/97 730	None - $1,000	Capital Gains	None - $200	S
SP	US Treasury Note 5 5%	$1,001 - $15,000	Interest	$201 - $1,000	
SP	US Treasury Note 7 25%	$50,001 - $100,000	Interest	$2,501 - $5,000	
SP	Putnam Fund for Growth & Income	$15,001 - $50,000	Capital Gains and Dividends	$2,501 - $5,000	NA
SP	Putnam Health Sciences Trust	$1,001 - $15,000	Capital Gains and Dividends	None - $200	NA
SP	Putnam Intl New Opportunities Fund	$1,001 - $15,000	Capital Gains and Dividends	None - $200	NA
SP	Putnam New Opportunities Fund	$1,001 - $15,000	Capital Gains and Dividends	None - $200	NA

SCHEDULE III -- ASSETS AND "UNEARNED" INCOME

SP	Putnam New Value Fund	$1,001 - $15,000	Capital Gains and Dividends	None - $200	NA
SP	Putnam OTC & Emerging Growth Fund	$1,001 - $15,000	Capital Gains and Dividends	$201 - $1,000	NA
SP	Putnam Voyager Fund	$15,001 - $50,000	Capital Gains and Dividends	$1,001 - $2,500	NA
SP	IRA-Paine Webber-cash fund	$1,001 - $15,000	Dividends	$201 - $1,000	
SP	IRA-Edward Jones-cash fund	$1,001 - $15,000	Dividends	$201 - $1,000	NA
SP	IRA-Edward Jones-Wal Mart Stores, Inc	$1,001 - $15,000	Dividends	None - $200	NA
SP	IRA-Edward Jones-Van Kampen Amer Growth Fund	$1,001 - $15,000	Capital Gains and Dividends	None - $200	NA
SP	IRA-Edward Jones-Protective Life Annuity	$1,001 - $15,000	Capital Gains and Dividends	$201 - $1,000	NA
	US T-Bill 2/13/97	$15,001 - $50,000	Interest	$201 - $1,000	S
	Put USX-US Steel 4/97 30	None - $1,000	Capital Gains	$2,501 - $5,000	S
	Put PPG Industries 5/97 60	None - $1,000	Capital Gains	$5,001 - $15,000	S
DC	O W Coburn Grandchildren's Trust	None - $1,000	Capital Gains and Dividends	$5,001 - $15,000	E
DC	Thomas A Coburn Trust for Sarah J Coburn	$250,001 - $500,000	Capital Gains and Dividends	$5,001 - $15,000	
JT	Boatmen's National Bank of Oklahoma, account	$15,001 - $50,000	Interest	$201 - $1,000	
JT	Territory National Bank, account	$1,001 - $15,000	Interest	None - $200	
JT	Paine Webber, Inc, cash funds	$15,001 - $50,000	Dividends	$201 - $1,000	
JT	Oil & Gas Royalty	$1,001 - $15,000	Royalty	$201 - $1,000	
	Central Costanera S A	$1,001 - $15,000	Capital Gains	None - $200	P
	Put Coca Cola 5/98 65	$1,001 - $15,000	Capital Gains	None - $200	P
SP	Central Costanera S A	$1,001 - $15,000	Capital Gains	None - $200	P
SP	OGE Energy Corp	$50,001 - $100,000	Dividends	$2,501 - $5,000	P
SP	US T-Bill 4/10/97	None - $1,000	Interest	$1,001 - $2,500	S
SP	US T-Bill 7/10/97	None - $1,000	Interest	$1,001 - $2,500	S
SP	US T-Bill 12/4/97	None - $1,000	Interest	$1,001 - $2,500	S
	US T-Bill 12/4/97	None - $1,000	Interest	$1,001 - $2,500	S

SCHEDULE III -- ASSETS AND "UNEARNED" INCOME

	Coca Cola	None - $1,000	Capital Gains	$5,001 - $15,000	S
	General Electric	None - $1,000	Capital Gains	$5,001 - $15,000	S
	Put IBM 4/98 110	None - $1,000	Capital Gains	$5,001 - $15,000	S
	Paine Webber, Inc, cash fund	$100,001 - $250,000	Dividends	$5,001 - $15,000	NA
SP	Paine Webber, inc, cash fund	$100,001 - $250,000	Dividends	$5,001 - $15,000	
	Put IBM 7/97 85	None - $1,000	Capital Gains	$2,501 - $5,000	S
	Comair Holding Inc	None - $1,000	Capital Gains	$1,001 - $2,500	

SCHEDULE IV -- TRANSACTIONS

Report any purchase, sale, or exchange by you, your spouse, or dependent child during the reporting year of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child, or the purchase or sale of your personal residence, unless it is rented out. For further information, see Instructions, pages 20-21.

SP,DC,JT	Asset	Type of Transaction	Date	Amount of Transaction
	Example | Mega Corporation Common Stock	Purchase	10/12/94	$15,001 - $50,000
SP	Amoco Corp	Sold	1/2/97	$15,001 - $50,000
SP	AVNET Corp	Sold	1/2/97	$1,001 - $15,000
SP	Coastal Corp	Sold	1/2/97	$1,001 - $15,000
SP	Cognizant Corp	Sold	1/2/97	$1,001 - $15,000
SP	Dillard Dept Stores	Sold	1/3/97	$1,001 - $15,000
SP	Dun & Bradstreet Corp	Sold	1/2/97	$1,001 - $15,000
SP	Emerson Electric	Sold	1/2/97	$1,001 - $15,000
SP	FNMA Corp	Sold	1/2/97	$1,001 - $15,000
SP	First Union Corp	Sold	1/2/97	$1,001 - $15,000
SP	Ford Motor Company	Sold	1/2/97	$1,001 - $15,000
SP	H J Heinz Co	Sold	1/3/97	$1,001 - $15,000
SP	ITT Corp	Sold	1/2/97	$1,001 - $15,000
SP	ITT Hartford Group	Sold	1/2/97	$1,001 - $15,000
SP	ITT Industries, Inc	Sold	1/2/97	$1,001 - $15,000
SP	Knight Ridder, Inc	Sold	1/2/97	$1,001 - $15,000
SP	Lehman Bros Holdings, Inc	Sold	1/2/97	$1,001 - $15,000
SP	Lucent Technologies	Sold	1/2/97	$1,001 - $15,000
SP	Mallincrodt, Inc	Sold	1/2/97	$1,001 - $15,000
SP	Merck & Co	Sold	1/2/97	$15,001 - $50,000
SP	Nationsbank	Sold	1/2/97	$1,001 - $15,000
SP	Pitney Bowes	Sold	1/2/97	$1,001 - $15,000
SP	Repsol S A ADR	Sold	1/2/97	$1,001 - $15,000

SCHEDULE IV -- TRANSACTIONS

Report any purchase, sale, or exchange by you, your spouse, or dependent child during the reporting year of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child, or the purchase or sale of your personal residence, unless it is rented out. For further information, see Instructions, pages 20-21

SP,DC,JT	Asset	Type of Transaction	Date	Amount of Transaction
	Example: Mega Corporation Common Stock	Purchase	10/12/94	$15,001 - $50,000
SP	Sara Lee Corp	Sold	1/2/97	$1,001 - $15,000
SP	Stone Container Corp	Sold	1/2/97	$1,001 - $15,000
SP	Telefonos De Mexico	Sold	1/3/97	$1,001 - $15,000
SP	Textron	Sold	1/2/97	$1,001 - $15,000
SP	Tyco Intl, Inc	Sold	1/2/97	$15,001 - $50,000
SP	United Healthcare Group	Sold	1/2/97	$1,001 - $15,000
SP	USX-U S Steel	Sold	1/2/97	$1,001 - $15,000
SP	Grand River Dam Authority 6 8%	Sold	6/2/97	$1,001 - $15,000
	US T-Bill 2/13/97	Sold	2/13/97	$15,001 - $50,000
	Put USX-U S Steel 4/97 30	Sold	4/3/97	$1,001 - $15,000
	Put PPG Industries 5/97 60	Sold	4/1/97	$1,001 - $15,000
	Central Costanera S A ADR	Purchase	8/28/97	$15,001 - $50,000
	Central Costanera S A ADR	Purchase	11/11/97	$1,001 - $15,000
	Central Costanera S A ADR	Sold	12/16/97	$1,001 - $15,000
	Put Coca Cola 5/98 65	Purchase	12/8/97	$1,001 - $15,000
SP	Central Costanera S A ADR	Purchase	8/28/97	$15,001 - $50,000
SP	Central Costanera S A ADR	Purchase	11/11/97	$1,001 - $15,000
SP	Central Costanera S A ADR	Sold	12/16/97	$1,001 - $15,000
SP	OGE Energy Corp	Purchase	2/5/97	$50,001 - $100,000
SP	US T-Bill 4/10/97	Purchase	1/3/97	$50,001 - $100,000
SP	US T-Bill 4/10/97	Sold	4/10/97	$50,001 - $100,000

SCHEDULE IV -- TRANSACTIONS

Report any purchase, sale, or exchange by you, your spouse, or dependent child during the reporting year of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child, or the purchase or sale of your personal residence, unless it is rented out. For further information, see Instructions, pages 20-21.

SP,DC,JT	Asset	Type of Transaction	Date	Amount of Transaction
	Example: Mega Corporation Common Stock	Purchase	10/12/94	$15,001 - $50,000
SP	US T-Bill 7/10/97	Purchase	1/3/97	$50,001 - $100,000
SP	US T-Bill 7/10/97	Sold	7/10/97	$50,001 - $100,000
SP	US T-Bill 12/04/97	Purchase	8/28/97	$50,001 - $100,000
SP	US T-Bill 12/04/97	Sold	12/04/97	$50,001 - $100,000
	US T-Bill 12/04/97	Purchase	8/28/97	$50,001 - $100,000
	US T-Bill 12/04/97	Sold	12/04/97	$50,001 - $100,000
	Coca Cola	Sold	7/15/97	$50,001 - $100,000
	Coca Cola	Purchase	8/15/97	$50,001 - $100,000
	General Electric	Sold	7/15/97	$50,001 - $100,000
	General Electric	Purchase	8/27/97	$50,001 - $100,000
	Put IBM 4/98 110	Purchase	12/8/97	$1,001 - $15,000
	Put IBM 4/98 110	Sold	12/12/97	$1,001 - $15,000
	Put IBM 7/97 85	Sold	6/4/97	$1,001 - $15,000
	Put IBM 7/97 85	Purchase	6/10/97	$1,001 - $15,000
	Comair Holding Inc	Purchase	9/16/97	$15,001 - $50,000
	Comair Holding Inc	Sold	12/19/97	$15,001 - $50,000
	IBM	Sold	7/15/97	$50,001 - $100,000
	IBM	Purchase	7/21/97	$100,001 - $250,000
	Put General Electric 3/98 75	Purchase	12/8/97	$1,001 - $15,000
	Put General Electric 3/98 75	Sold	12/15/97	$1,001 - $15,000

SCHEDULE VII -- TRAVEL PAYMENTS AND REIMBURSEMENTS

Identify the source and list travel itinerary, dates, and nature of expenses provided for travel and travel-related expenses totalling more than $250 received by you, your spouse, or a dependent child during the reporting period. Indicate whether a family member accompanied the traveler at the sponsor's expense, and the amount of time, if any, that was not at the sponsor's expense. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor.
Exclude: Travel-related expenses provided by federal, state and local governments, or by a foreign government required to be separately reported under the Foreign Gifts and Decorations Act (5 U.S.C. 7342), travel paid for by a Federal political committee, travel provided to a spouse or dependent child that is totally independent of his or her relationship to you. For further information, see Instructions, pages 24-26

Source	Date(s)	Point of Departure--Destination--Point of Return	Lodging? (Y/N)	Food? (Y/N)	Was a Family Member Included? (Y/N)	Any time not at sponsor's expense
Examples Chicago Chamber of Commerce	Mar 2	Wash , D C -Chicago-Wash , D C	N	N	N	N
Mega Corporation	Aug 8-13	Wash , D C -Los Angeles-Cleveland	Y	Y	Y	4 Days
Center for Market Processes	1/3197 to 2/2/97	DC - Baltimore - DC	Y	Y	N	No
National Opthalmology Prayer Breakfast Committee	10/26/97 to 10/27/97	DC - San Francisco - DC	Y	Y	N	No

SCHEDULE VIII -- POSITIONS

Report all positions, compensated or uncompensated, held during the current calendar year as an officer, director, trustee of an organization, partner, proprietor, representative, employee, or consultant of any corporation, firm, partnership or other business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States. For further information, see Instructions, page 26.
Exclude: Positions held in any religious, social, fraternal, or political entities; positions solely of an honorary nature; and positions listed on Schedule I.

Position	Organization
President	Thomas A Coburn, MD, Inc
President	T&C Construction, Inc
General Partner	Professional Building Partnership
General Partner	Plaza Medical Center Partnership
General Partner	Muskogee Allergy Clinic Partnership
Manager	Maternal & Family Practice Associates, LLC

SCHEDULE IX -- AGREEMENTS

Identify the date, parties to, and general terms of any agreement or arrangement with respect to: future employment; a leave of absence during the period of government service; continuation or deferral of payments by a former or current employer other than the U S Government; or continuing participation in an employee welfare or benefit plan maintained by a former employer For further information, see Instructions, pages 26-27

Date	Parties To	Terms of Agreement
11/09/94	Thomas A Coburn and associate physicians	The Congressman may continue to practice on a
	Dr Michael R Butner, Evan D Cole and	very limited basis while at home from Washington
	Timothy W Holder	in order to preserve his practice His associates
		will care for the majority of his patients

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1997

FORM A
For use by Members, officers, and employees

99 MAY 14 PM 1:38

HAND DELIVERED (9)

Michael Allen (Mac) Collins
(Full Name)

80 Riverside Court
(Mailing Address)

Hampton Georgia 30228

Daytime Telephone 202-225-5901

MC (Office Use Only)

Filer Status	[X] Member of the U.S. House of Representatives	State GA District Third	[ ] Officer or Employee	Employing Office	**A *$200 penalty* shall be assessed against anyone who files more than 30 days late.**
Report Type	[X] Annual (May 15)	[ ] Amendment		[ ] Termination Termination Date	

PRELIMINARY INFORMATION — ANSWER EACH OF THESE QUESTIONS

I Did you or your spouse have "earned" income (e.g., salaries or fees) of $200 or more from any source in the reporting period? **If yes, complete and attach Schedule I.** — Yes [X] No [ ]

II Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? **If yes, complete and attach Schedule II.** — Yes [X] No [ ]

III Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? **If yes, complete and attach Schedule III.** — Yes [X] No [ ]

IV Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset worth more than $1,000 in the reporting period? **If yes, complete and attach Schedule IV.** — Yes [X] No [ ]

V Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? **If yes, complete and attach Schedule V.** — Yes [X] No [ ]

VI Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $250 and not otherwise exempt)? **If yes, complete and attach Schedule VI.** — Yes [ ] No [X]

VII Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $250 from one source)? **If yes, complete and attach Schedule VII.** — Yes [X] No [ ]

VIII Did you hold any reportable positions on or before the date of filing in the current calendar year? **If yes, complete and attach Schedule VIII.** — Yes [X] No [ ]

IX Did you have any reportable agreement or arrangement with an outside entity? **If yes, complete and attach Schedule IX.** — Yes [ ] No [X]

Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION — ANSWER EACH OF THESE QUESTIONS

TRUSTS—Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child? — Yes [ ] No [X]

EXEMPTION—Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption? — Yes [ ] No [X]

CERTIFICATION — THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended. The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct or its designee. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil penalties and criminal sanctions (*See* 5 U.S.C. app. 4, §104 and 18 U.S.C. §1001)

SIGNATURE OF REPORTING INDIVIDUAL Mac Collins

DATE (Month/Day/Year) May 14, 1998

SCHEDULE I — EARNED INCOME

List the source, type, and amount of earned income from any source (other than the filer's current employment by the U.S. Government) totalling $200 or more during the preceding calendar year. For a spouse, list the source and amount of any honoraria; list only the source for other spouse earned income exceeding $1,000.

Source	Type	Amount
Examples: Keene State	Approved Teaching Fee	$6,000
State of Maryland	Legislative Pension	$9,000
Civil War Roundtable (Oct 2nd)	Spouse Speech	$1,000
Ontario County Board of Education	Spouse Salary	NA
Collins Trucking Company, Inc.	Spouse Salary	NA

For payments to charity in lieu of honoraria, use Schedule II.

SCHEDULE II — PAYMENTS IN LIEU OF HONORARIA MADE TO CHARITY

List the source, activity (i.e., speech, appearance, or article), date, and amount of any payment made by the sponsor of an event to a charitable organization in lieu of an honorarium. A separate confidential list of charities receiving such payments must be filed directly with the Committee on Standards of Official Conduct. An envelope for transmitting the list is included in each Member's filing package.

Source	Activity	Date	Amount
Examples Association of American Associations, Wash., D.C. XYZ Magazine	Speech Article	Feb. 2, 1997 Aug. 13, 1997	$2,000 $500
Kmart Kids Race Against Drugs	drove lawn tractor	Sept.10,1997	$500

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SCHEDULE III — ASSETS AND "UNEARNED" INCOME

Name Michael A. (Mac) Collins — Page 4 of 9

BLOCK A — Asset and/or Income Source	SP/DC/JT	BLOCK B — Value of Asset at close of reporting year												BLOCK C — Type of Income							BLOCK D — Amount of Income										BLOCK E — Transaction
		A None	B $1 – $1,000	C $1,001 – $15,000		E $15,001 – $50,000	F $50,001 – $100,000	G $100,001 – $250,000	H $250,001 – $500,000	I $500,001 – $1,000,000	J $1,000,001 – $5,000,000	K $5,000,001 – $25,000,000	L $25,000,001 – $50,000,000	Over $50,000,000	DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Type of Income (Specify For Example Partnership Income or Farm Income)	I None	II $1 – $200	III $201 – $1,000	IV $1,001 – $2,500	V $2,501 – $5,000	VI $5,001 – $15,000	VII $15,001 – $50,000	VIII $50,001 – $100,000	IX $100,001 – $1,000,000	X $1,000,001 – $5,000,000	XI Over $5,000,000	P, S, E
	SP	SP	Mega Corp Stock												X																	P
	DC	*Examples*	Simon & Schuster			Indefinite															Royalties											
	JT		1st Bank of Paducah, KY accounts					X									X										X					
		Cong.Fed.Credit Union			X												X						X									
		Western Reserve (IRA)						NA											NA									NA				
		Collins Trucking Co., Inc (Sub-S)								X					X														X			
		McIntosh State Bank			X												X							X								
		James A. Freeman				X												X									X				S	
		Putnam Fund (Mutual Fund)				X									X									X								P	

Exclude: Your personal residence(s) (unless there is rental income); any debt owed to you by your spouse, or by your or your spouse's child, parent, or sibling, any deposits totalling $5,000 or less in personal savings accounts, any financial interests in or income derived from U.S. Government retirement programs.

If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC) or is jointly held (JT), in the optional column on the far left

For additional assets and unearned income, use next page.

SCHEDULE III — ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Name Michael A.(Mac) Collins | Page 5 of 9

SP, DC, JT	BLOCK A Asset and/or Income Source	BLOCK B Year-End Value of Asset											BLOCK C Type of Income							BLOCK D Amount of Income										BLOCK E Transaction
		A None	B $1 - $1,000	C $1,001 - $15,000	D $15,001 - $50,000	E $50,001 - $100,000	F $100,001 - $250,000	G $250,001 - $500,000	H $500,001 - $1,000,000	I $1,000,001 - $5,000,000	J $5,000,001 - $25,000,000	K $25,000,001 - $50,000,000	L Over $50,000,000	DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Type of Income (Specify)	I None	II $1 - $200	III $201 - $1,000	IV $1,001 - $2,500	V $2,501 - $5,000	VI $5,001 - $15,000	VII $15,001 - $50,000	VIII $50,001 - $100,000	IX $100,001 - $1,000,000	X $1,000,001 - $5,000,000	XI Over $5,000,000	P, S, E
	Jackson Investment Club				X									X									X							P

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Name Michael A.(Mac) Collins | Page 6 of 9

SCHEDULE IV — TRANSACTIONS

Report any purchase, sale, or exchange by you, your spouse, or dependent child during the reporting year of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child, or the purchase or sale of your personal residence, unless it is rented out.		Type of Transaction			Date	Amount of Transaction									
		PURCHASE	SALE	EXCHANGE	(MO/DAY/YR)	B $1,001–$15,000	C $15,001–$50,000	D $50,001–$100,000	E $100,001–$250,000	F $250,001–$500,000	G $500,001–$1,000,000	H $1,000,001–$5,000,000	I $5,000,001–$25,000,000	J $25,000,001–$50,000,000	K Over $50,000,000
SP, DC, JT	**Asset**														
SP	*Example:* Mega Corporation Common Stock	X			10–12–97		X								
	James A. Freeman		X		07-01-97		X								
	Putnam Fund (Mutual Fund)	X			07-18-97		X								
	Jackson Investment Club	X			01-01-97	X									

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SCHEDULE V — LIABILITIES

Report liabilities of over $10,000 owed to any one creditor ***at any time*** during the reporting period by you, your spouse, or dependent child. Mark the highest amount owed during the year. **Exclude:** Any mortgage on your personal residence (unless it is rented out), loans secured by automobiles, household furniture, or appliances, and liabilities owed to a spouse, or the child, parent, or sibling of you or your spouse. Report ***revolving charge accounts*** only if the balance at the end of the reporting period exceeded $10,000.

SP, DC, JT	Creditor	Type of Liability	Amount of Liability									
			B $10,001 – $15,000	C $15,001 – $50,000	D $50,001 – $100,000	E $100,001 – $250,000	F $250,001 – $500,000	G $500,001 – $1,000,000	H $1,000,001 – $5,000,000	I $5,000,001 – $25,000,000	J $25,000,001 – $50,000,000	K Over $50,000,000
Example	First Bank of Wilmington, Delaware	Mortgage on 123 Main St., Dover, Del				X						
	McIntosh State Bank, Jackson,GA	demand note		X								

SCHEDULE VI — GIFTS

Report the source, a brief description, and the value of all gifts totalling more than $250 received by you, your spouse, or a dependent child from any source during the year.

Exclude: Gifts from relatives, gifts of personal hospitality of an individual, local meals, and gifts to a spouse or dependent child that are totally independent of his or her relationship to you. Gifts with a value of $100 or less need not be added towards the $250 disclosure threshold.

Note: The gift rule (House Rule 51) prohibits gifts except as specifically provided in the rule.

Source	Description	Value
Example Mr. Joseph H. Smith, Anytown, Anystate	Silver Platter (determination on personal friendship received from Committee on Standards)	$270

Use additional sheets if more space is required.

SCHEDULE VII —TRAVEL PAYMENTS AND REIMBURSEMENTS

Identify the source and list travel itinerary, dates, and nature of expenses provided for travel and travel-related expenses totalling more than $250 received by you, your spouse, or a dependent child during the reporting period. Indicate whether a family member accompanied the traveler at the sponsor's expense, and the amount of time, if any, that was not at the sponsor's expense. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor.

Exclude: Travel-related expenses provided by federal, state, and local governments, or by a foreign government required to be separately reported under the Foreign Gifts and Decorations Act (5 U.S.C. § 7342); travel paid for by a Federal political committee; travel provided to a spouse or dependent child that is totally independent of his or her relationship to you.

Source	Date(s)	Point of Departure—Destination—Point of Return	Lodging? (Y/N)	Food? (Y/N)	Was a Family Member Included? (Y/N)	Any time not at sponsor's expense
Examples: Chicago Chamber of Commerce	Mar. 2	Wash., D.C.—Chicago—Wash., D.C.	N	N	N	N
Roycroft Corporation	Aug. 6–13	Wash., D.C.—Los Angeles—Cleveland	Y	Y	Y	4 Days
Asso. of American Railroads	Apr.4-7	Atl.-Palm Beach-Wash.DC	Y	Y	Y	N
Forest Landowners Asso.	May 2	Wash.DC-Wmsburg.VA-Atl.	N	Y	N	N
Asia Pacific Exchange Foundation	May 23-28	Wash.DC-Uzbekistan-returned by CODEL	Y	Y	Y	N
Bus. Gov. Relations Council	Oct.16-19	Wash.DC-White Sulphur Spgs. VA-Wash.DC	Y	Y	Y	N

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SCHEDULE VIII — POSITIONS

Report all positions, compensated or uncompensated, held during the current calendar year as an officer, director, trustee of an organization, partner, proprietor, representative, employee, or consultant of any corporation, firm, partnership, or other business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States.

Exclude: Positions held in any religious, social, fraternal, or political entities; positions solely of an honorary nature; and positions listed on Schedule I.

Position	Name of Organization
Director	Georgia Forestry Association
Advisor	Collins Trucking Company, Inc.

SCHEDULE IX — AGREEMENTS

Identify the date, parties to, and general terms of any agreement or arrangement with respect to: future employment; a leave of absence during the period of government service; continuation or deferral of payments by a former or current employer other than the U.S. Government; or continuing participation in an employee welfare or benefit plan maintained by a former employer.

Date	Parties To	Terms of Agreement

GPO 1998 46-260 (mac)

Use additional sheets if more space is required.

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1997

FORM A
For use by Members, officers, and employees

98 MAY 14 PM 4:29

LARRY ED COMBEST
(Full Name)

1026 LONGWORTH H.O.B.
WASHINGTON, DC 20515
(Mailing Address)

202-225-4005
Daytime Telephone

HAND DELIVERED
MC
(Office Use Only)

Filer Status	☑ Member of the U.S. House of Representatives	State Texas District 19	☐ Officer or Employee	Employing Office
Report Type	☑ Annual (May 15)	☐ Amendment	☐ Termination	Termination Date

A *$200 penalty* shall be assessed against anyone who files more than 30 days late.

PRELIMINARY INFORMATION — ANSWER EACH OF THESE QUESTIONS

I Did you or your spouse have "earned" income (e.g., salaries or fees) of $200 or more from any source in the reporting period? **If yes, complete and attach Schedule I.** — Yes ☑ No ☐

II Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? **If yes, complete and attach Schedule II.** — Yes ☑ No ☐

III Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? **If yes, complete and attach Schedule III.** — Yes ☑ No ☐

IV Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset worth more than $1,000 in the reporting period? **If yes, complete and attach Schedule IV.** — Yes ☑ No ☐

V Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? **If yes, complete and attach Schedule V.** — Yes ☐ No ☑

VI Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $250 and not otherwise exempt)? **If yes, complete and attach Schedule VI.** — Yes ☐ No ☑

VII Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $250 from one source)? **If yes, complete and attach Schedule VII.** — Yes ☑ No ☐

VIII Did you hold any reportable positions on or before the date of filing in the current calendar year? **If yes, complete and attach Schedule VIII.** — Yes ☐ No ☑

IX Did you have any reportable agreement or arrangement with an outside entity? **If yes, complete and attach Schedule IX.** — Yes ☐ No ☑

Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION — ANSWER EACH OF THESE QUESTIONS

TRUSTS—Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child? — Yes ☐ No ☑

EXEMPTION—Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption? — Yes ☐ No ☑

CERTIFICATION — THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended. The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct or its designee. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil penalties and criminal sanctions (*See* 5 U.S.C. app. 4, §104 and 18 U.S.C. §1001)

SIGNATURE OF REPORTING INDIVIDUAL Larry Combest

DATE (Month/Day/Year) 5-15-98

SCHEDULE I — EARNED INCOME

List the source, type, and amount of earned income from any source (other than the filer's current employment by the U.S. Government) totalling $200 or more during the preceding calendar year. For a spouse, list the source and amount of any honoraria; list only the source for other spouse earned income exceeding $1,000.

	Source	Type	Amount
Examples	Keene State	Approved Teaching Fee	$6,000
	State of Maryland	Legislative Pension	$9,000
	Civil War Roundtable (Oct. 2nd)	Spouse Speech	$1,000
	Ontario County Board of Education	Spouse Salary	NA
	SHANDWICK INTERNATIONAL	SPOUSE SALARY	N A
	BRICKFIELD, BURCHETTE, RITTS	SPOUSE SALARY	N A

For payments to charity in lieu of honoraria, use Schedule II.

Name LARRY COMBEST	Page 3 of 7

SCHEDULE II — PAYMENTS IN LIEU OF HONORARIA MADE TO CHARITY

List the source, activity (i e , speech, appearance, or article), date, and amount of any payment made by the sponsor of an event to a charitable organization in lieu of an honorarium A separate confidential list of charities receiving such payments must be filed directly with the Committee on Standards of Official Conduct An envelope for transmitting the list is included in each Member's filing package

Source	Activity	Date	Amount
Examples Association of American Associations, Wash , D C	Speech	Feb 2, 1997	$2,000
XYZ Magazine	Article	Aug 13, 1997	$500
SOUTHERN SEEDSMENS ASSOCIATION	SPEECH	JAN 19, 1997	$ 1500

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Name LARRY COMBEST Page 4 of

SCHEDULE III — ASSETS AND "UNEARNED" INCOME

BLOCK A — Asset and/or Income Source

Identify (a) each asset held for investment or production of income with a fair market value exceeding $1,000 at the end of the reporting year, and (b) any other asset or source of income which generated more than $200 in "unearned" income during the year. For rental property or land, provide an address. Provide full names of any mutual funds. For an IRA or retirement plan that is *self-directed*, list the underlying assets worth more than $1,000. For an IRA or retirement plan that is not selfdirected, name the institution holding the account.

Exclude: Your personal residence(s) (unless there is rental income), any debt owed to you by your spouse, or by your or your spouse's child, parent, or sibling, any deposits totalling $5,000 or less in personal savings accounts, any financial interests in or income derived from U.S. Government retirement programs.

If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC) or is jointly held (JT), in the optional column on the far left.

BLOCK B — Value of Asset

at close of reporting year.
If you use a valuation method other than fair market value, please specify the method used. If an asset was sold and is included only because it generated income, the value should be "None."

BLOCK C — Type of Income

BLOCK D — Amount of Income

For IRA's and retirement plans that are *not* self-directed, you may write in "NA" for income.

BLOCK E — Transaction

Indicate if asset was purchased (P), sold (S), or exchanged (E) in reporting year.

	BLOCK A	BLOCK B												BLOCK C							BLOCK D										BLOCK E
		A None	B $1 – $1,000	C $1,001 – $15,000	D $15,001 – $50,000	E $50,001 – $100,000	F $100,001 – $250,000	G $250,001 – $500,000	H $500,001 – $1,000,000	I $1,000,001 – $5,000,000	J $5,000,001 – $25,000,000	K $25,000,001 – $50,000,000	L Over $50,000,000	DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Type of Income (Specify. For Example: Partnership Income or Farm Income)	I None	II $1 – $200	III $201 – $1,000	IV $1,001 – $2,500	V $2,501 – $5,000	VI $5,001 – $15,000	VII $15,001 – $50,000	VIII $50,001 – $100,000	IX $100,001 – $1,000,000	X $1,000,001 – $5,000,000	XI Over $5,000,000	P, S, E
SP						X								X										X							P
DC	*Examples*		Indefinite																	Royalties											
JT							X									X									X				X		
JT	MUTUAL FUND - FEDERATED AMERICAN LEADERS - A			X													X						X								
JT	NATIONS FUND - NATIONS BANK - WASHINGTON DC.	X														X							X								S
JT	TEMPLETON MONEY FUND FRANKLIN-TEMPLETON		X														X	X			X										P, S
JT	TEMPLETON DEVELOPING MARKETS - CLASS II			X										X			X						X								P
JT	TEMPLETON FOREIGN FUND - CLASS II				X									X			X							X								P
SP	FEDERATED A - AMERICAN LEADERS FUND - IRA			X													X							X								

For additional assets and unearned income, use next page.

SCHEDULE III — ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Name LARRY COMBEST | Page 5 of 7

	BLOCK A	BLOCK B											BLOCK C							BLOCK D										BLOCK E
	Asset and/or Income Source	Year-End Value of Asset											Type of Income							Amount of Income										Transaction
SP DC JT		A None	B $1 - $1,000	C $1,001 - $15,000	D $15,001 - $50,000	E $50,001 - $100,000	F $100,001 - $250,000	G $250,001 - $500,000	H $500,001 - $1,000,000	I $1,000,001 - $5,000,000	J $5,000,001 - $25,000,000	K $25,000,001 - $50,000,000	L Over $50,000,000	DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Type of Income (Specify)	I None	II $1 - $200	III $201 - $1,000	IV $1,001 - $2,500	V $2,501 - $5,000	VI $5,001 - $15,000	VII $15,001 - $50,000	VIII $50,001 - $100,000	IX $100,001 - $1,000,000	X $1,000,001 - $5,000,000	XI Over $5,000,000	P S E
SP	AIM-VALUE FUND IRA			X										X			X						X							
JT	WRIGHT PATMAN FED. CREDIT UNION			X												X							X							

This page may be copied if more space is required.

SCHEDULE IV — TRANSACTIONS

Name LARRY COMBEST | Page 6 of 7

Report any purchase, sale, or exchange by you, your spouse, or dependent child during the reporting year of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child, or the purchase or sale of your personal residence, unless it is rented out.

SP, DC, JT	Asset	Type of Transaction: PURCHASE	SALE	EXCHANGE	Date (MO/DAY/YR)	Amount of Transaction: B ($1,001–$15,000)	C ($15,001–$50,000)	D ($50,001–$100,000)	E ($100,001–$250,000)	F ($250,001–$500,000)	G ($500,001–$1,000,000)	H ($1,000,001–$5,000,000)	I ($5,000,001–$25,000,000)	J ($25,000,001–$50,000,000)	K (Over $50,000,000)
SP	*Example:* Mega Corporation Common Stock	X			10-12-97		X								
JT	NATIONS MONEY FUND - NATIONS BANK WASHINGTON, DC.		X		6-15-97		X								
JT	TEMPLETON MONEY FUND FRANKLIN-TEMPLETON	X			6-15-97		X								
JT	TEMPLETON DEVELOPING MARKETS CLASS II - FRANKLIN-TEMPLETON	X			7-1-97	X									
JT	" " "	X			8-4-97	X									
JT	" " "	X			10-31-97	X									
JT	" " "	X			12-22-97	X									
JT	TEMPLETON FOREIGN FUND-CLASS II	X			7-1-97		X								
JT	" " " "	X			10-7-97	X									
JT	" " " "	X			10-31-97	X									
JT	TEMPLETON MONEY FUND		X		7-1-97		X								
JT	" " "		X		10-12-97	X									
JT	" " "		X		11-1-97	X									
JT	" " "		X		12-22-97	X									

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Name LARRY COMBEST	Page 7 of 7

SCHEDULE VII —TRAVEL PAYMENTS AND REIMBURSEMENTS

Identify the source and list travel itinerary, dates, and nature of expenses provided for travel and travel-related expenses totalling more than $250 received by you, your spouse, or a dependent child during the reporting period. Indicate whether a family member accompanied the traveler at the sponsor's expense, and the amount of time, if any, that was not at the sponsor's expense. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor.

Exclude: Travel-related expenses provided by federal, state, and local governments, or by a foreign government required to be separately reported under the Foreign Gifts and Decorations Act (5 U.S.C. § 7342); travel paid for by a Federal political committee; travel provided to a spouse or dependent child that is totally independent of his or her relationship to you.

Source		Date(s)	Point of Departure—Destination—Point of Return	Lodging? (Y/N)	Food? (Y/N)	Was a Family Member Included? (Y/N)	Any time not at sponsor's expense
Examples:	Chicago Chamber of Commerce	Mar. 2	Wash., D.C.—Chicago—Wash., D.C.	N	N	N	N
	Roycroft Corporation	Aug. 6–13	Wash., D.C.—Los Angeles—Cleveland	Y	Y	Y	4 Days
KLAMATH ALLIANCE FOR RESOURCE AND ENVIRON.		MAY 2-5	WASH. DC - MEDFORD, OR WASHDC.	Y	Y	Y	N
THE ASPEN INSTITUTE		MAR 7-9	WASH. DC - HERSHEY, PENN - WASH. D.C.	Y	Y	Y	N

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UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1997

FORM A
For use by Members, officers, and employees

RECEIVED
98 MAY 15 AM 10:23

Gary A. Condit
(Full Name)

920 16th Street, Suite C
(Mailing Address)

209-527-1914
Daytime Telephone

Modesto, CA 95354

HAND DELIVERED
(Office Use Only)

9

Filer Status	[X] Member of the U.S House of Representatives	State CA District 18th	[ ] Officer or Employee	Employing Office
Report Type	[X] Annual (May 15)	[ ] Amendment	[ ] Termination	Termination Date

A *$200 penalty* shall be assessed against anyone who files more than 30 days late.

PRELIMINARY INFORMATION — ANSWER EACH OF THESE QUESTIONS

I. Did you or your spouse have "earned" income (e.g., salaries or fees) of $200 or more from any source in the reporting period? **If yes, complete and attach Schedule I.**	Yes [ ]	No [X]	VI. Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $250 and not otherwise exempt)? **If yes, complete and attach Schedule VI.**	Yes [ ]	No [X]
II. Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? **If yes, complete and attach Schedule II.**	Yes [ ]	No [X]	VII. Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $250 from one source)? **If yes, complete and attach Schedule VII.**	Yes [ ]	No [X]
III. Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? **If yes, complete and attach Schedule III.**	Yes [ ]	No [X]	VIII. Did you hold any reportable positions on or before the date of filing in the current calendar year? **If yes, complete and attach Schedule VIII.**	Yes [ ]	No [X]
IV. Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset worth more than $1,000 in the reporting period? **If yes, complete and attach Schedule IV.**	Yes [ ]	No [X]	IX. Did you have any reportable agreement or arrangement with an outside entity? **If yes, complete and attach Schedule IX.**	Yes [ ]	No [X]
V. Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? **If yes, complete and attach Schedule V.**	Yes [X]	No [ ]	**Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.**		

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION — ANSWER EACH OF THESE QUESTIONS

TRUSTS—Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child?	Yes [ ]	No [X]
EXEMPTION—Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption?	Yes [ ]	No [X]

CERTIFICATION — THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended. The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct or its designee. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil penalties and criminal sanctions (*See* 5 U.S.C. app. 4, §104 and 18 U.S.C. §1001)

SIGNATURE OF REPORTING INDIVIDUAL Gary A. Condit

DATE (Month/Day/Year)

Name	Gary A. Condit	Page 2 of 9

SCHEDULE I — EARNED INCOME

List the source, type, and amount of earned income from any source (other than the filer's current employment by the U.S. Government) totalling $200 or more during the preceding calendar year. For a spouse, list the source and amount of any honoraria; list only the source for other spouse earned income exceeding $1,000.

	Source	Type	Amount
Examples	Keene State	Approved Teaching Fee	$6,000
	State of Maryland	Legislative Pension	$9,000
	Civil War Roundtable (Oct 2nd)	Spouse Speech	$1,000
	Ontario County Board of Education	Spouse Salary	NA

For payments to charity in lieu of honoraria, use Schedule II.

SCHEDULE II — PAYMENTS IN LIEU OF HONORARIA MADE TO CHARITY

List the source, activity (i.e., speech, appearance, or article), date, and amount of any payment made by the sponsor of an event to a charitable organization in lieu of an honorarium. A separate confidential list of charities receiving such payments must be filed directly with the Committee on Standards of Official Conduct. An envelope for transmitting the list is included in each Member's filing package.

Source	Activity	Date	Amount
Examples: Association of American Associations, Wash., D.C.	Speech	Feb. 2, 1997	$2,000
XYZ Magazine	Article	Aug. 13, 1997	$500

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Name Gary A. Condit | Page 4 of 9

SCHEDULE III — ASSETS AND "UNEARNED" INCOME

BLOCK A — Asset and/or Income Source

Identify (a) each asset held for investment or production of income with a fair market value exceeding $1,000 at the end of the reporting year, and (b) any other asset or source of income which generated more than $200 in "unearned" income during the year. For rental property or land, provide an address. Provide full names of any mutual funds. For an IRA or retirement plan that is *self-directed*, list the underlying assets worth more than $1,000. For an IRA or retirement plan that is not selfdirected, name the institution holding the account.

Exclude: Your personal residence(s) (unless there is rental income), any debt owed to you by your spouse, or by your or your spouse's child, parent, or sibling, any deposits totalling $5,000 or less in personal savings accounts, any financial interests in or income derived from U.S. Government retirement programs.

If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC) or is jointly held (JT), in the optional column on the far left.

BLOCK B — Value of Asset

at close of reporting year. If you use a valuation method other than fair market value, please specify the method used. If an asset was sold and is included only because it generated income, the value should be "None."

BLOCK C — Type of Income

BLOCK D — Amount of Income

For IRA's and retirement plans that are *not* self-directed, you may write in "NA" for income.

BLOCK E — Transaction

Indicate if asset was purchased (P), sold (S), or exchanged (E) in reporting year.

	BLOCK A	BLOCK B												BLOCK C							BLOCK D										BLOCK E
		A None	B $1 – $1,000	C $1,001 – $15,000	$15,001 – $50,000	E $50,001 – $100,000	F $100,001 – $250,000	G $250,001 – $500,000	H $500,001 – $1,000,000	I $1,000,001 – $5,000,000	J $5,000,001 – $25,000,000	K $25,000,001 – $50,000,000	L Over $50,000,000	DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Type of Income (Specify. For Example: Partnership Income or Farm Income)	I None	II $1 – $200	III $201 – $1,000	IV $1,001 – $2,500	V $2,501 – $5,000	VI $5,001 – $15,000	VII $15,001 – $50,000	VIII $50,001 – $100,000	IX $100,001 – $1,000,000	X $1,000,001 – $5,000,000	XI Over $5,000,000	P, S, E
SP, DC, JT	*Examples*													X																	P
SP	Mega Corp. Stock					X																									
	Simon & Schuster		Indefinite																	Royalties											
	1st Bank of Paducah, KY accounts						X									X										X					

For additional assets and unearned income, use next page.

SCHEDULE III — ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Name Gary A. Condit | Page 5 of 9

	BLOCK A	BLOCK B											BLOCK C							BLOCK D										BLOCK E
	Asset and/or Income Source	Year-End Value of Asset											Type of Income							Amount of Income										Transaction
SP, DC, JT		A None	B $1 – $1,000	C $1,001 – $15,000	D $15,001 – $50,000	E $50,001 – $100,000	F $100,001 – $250,000	G $250,001 – $500,000	H $500,001 – $1,000,000	I $1,000,001 – $5,000,000	J $5,000,001 – $25,000,000	K $25,000,001 – $50,000,000	L Over $50,000,000	DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Type of Income (Specify)	I None	II $1 – $200	III $201 – $1,000	IV $1,001 – $2,500	V $2,501 – $5,000	VI $5,001 – $15,000	VII $15,001 – $50,000	VIII $50,001 – $100,000	IX $100,001 – $1,000,000	X $1,000,001 – $5,000,000	Xi Over $5,000,000	P, S, E

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SCHEDULE IV — TRANSACTIONS

Name Gary A. Condit | Page 6 of 9

Report any purchase, sale, or exchange by you, your spouse, or dependent child during the reporting year of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child, or the purchase or sale of your personal residence, unless it is rented out.

SP, DC, JT	Asset	Type of Transaction: PURCHASE	SALE	EXCHANGE	Date (MO/DAY/YR)	Amount of Transaction: B ($1,001–$15,000)	C ($15,001–$50,000)	D ($50,001–$100,000)	E ($100,001–$250,000)	F ($250,001–$500,000)	G ($500,001–$1,000,000)	H ($1,000,001–$5,000,000)	I ($5,000,001–$25,000,000)	J ($25,000,001–$50,000,000)	K (Over $50,000,000)
SP	*Example* Mega Corporation Common Stock	X			10-12-97		X								

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SCHEDULE V — LIABILITIES

Report liabilities of over $10,000 owed to any one creditor ***at any time*** during the reporting period by you, your spouse, or dependent child. Mark the highest amount owed during the year. **Exclude:** Any mortgage on your personal residence (unless it is rented out), loans secured by automobiles, household furniture, or appliances, and liabilities owed to a spouse, or the child, parent, or sibling of you or your spouse. Report ***revolving charge accounts*** only if the balance at the end of the reporting period exceeded $10,000.

SP, DC, JT	Creditor	Type of Liability	Amount of Liability									
			B $10,001– $15,000	C $15,001– $50,000	D $50,001– $100,000	E $100,001– $250,000	F $250,001– $500,000	G $500,001– $1,000,000	H $1,000,001– $5,000,000	I $5,000,001– $25,000,000	J $25,000,001– $50,000,000	K Over $50,000,000
	Example First Bank of Wilmington, Delaware	Mortgage on 123 Main St., Dover, Del				X						
JT	Wells Fargo Bank	Credit Line			X							

SCHEDULE VI — GIFTS

Report the source, a brief description, and the value of all gifts totalling more than $250 received by you, your spouse, or a dependent child from any source during the year.

Exclude: Gifts from relatives, gifts of personal hospitality of an individual, local meals, and gifts to a spouse or dependent child that are totally independent of his or her relationship to you. Gifts with a value of $100 or less need not be added towards the $250 disclosure threshold.

Note: The gift rule (House Rule 51) prohibits gifts except as specifically provided in the rule.

Source	Description	Value
Example Mr. Joseph H. Smith, Anytown, Anystate	Silver Platter (determination on personal friendship received from Committee on Standards)	$270

Use additional sheets if more space is required.

Name	Gary A. Condit	Page 8 of 9

SCHEDULE VII —TRAVEL PAYMENTS AND REIMBURSEMENTS

Identify the source and list travel itinerary, dates, and nature of expenses provided for travel and travel-related expenses totalling more than $250 received by you, your spouse, or a dependent child during the reporting period. Indicate whether a family member accompanied the traveler at the sponsor's expense, and the amount of time, if any, that was not at the sponsor's expense. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor.

Exclude: Travel-related expenses provided by federal, state, and local governments, or by a foreign government required to be separately reported under the Foreign Gifts and Decorations Act (5 U.S.C. § 7342); travel paid for by a Federal political committee; travel provided to a spouse or dependent child that is totally independent of his or her relationship to you.

	Source	Date(s)	Point of Departure—Destination—Point of Return	Lodging? (Y/N)	Food? (Y/N)	Was a Family Member Included? (Y/N)	Any time not at sponsor's expense
Examples:	Chicago Chamber of Commerce	Mar. 2	Wash , D C.—Chicago—Wash , D C	N	N	N	N
	Roycroft Corporation	Aug. 6–13	Wash., D.C.—Los Angeles—Cleveland	Y	Y	Y	4 Days

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SCHEDULE VIII — POSITIONS

Report all positions, compensated or uncompensated, held during the current calendar year as an officer, director, trustee of an organization, partner, proprietor, representative, employee, or consultant of any corporation, firm, partnership, or other business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States.

Exclude: Positions held in any religious, social, fraternal, or political entities; positions solely of an honorary nature; and positions listed on Schedule I.

Position	Name of Organization

SCHEDULE IX — AGREEMENTS

Identify the date, parties to, and general terms of any agreement or arrangement with respect to: future employment; a leave of absence during the period of government service; continuation or deferral of payments by a former or current employer other than the U.S. Government; or continuing participation in an employee welfare or benefit plan maintained by a former employer.

Date	Parties To	Terms of Agreement

Use additional sheets if more space is required.

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1997

FORM A
For use by Members, officers, and employees

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HAND DELIVERED
MC
(Office Use Only)

5

Rep. JOHN CONYERS, JR
(Full Name)
2426 Rayburn House Office Building
(Mailing Address)
WASHINGTON, D.C. 20515
Daytime Telephone 202-225-5126

Filer Status
- [X] Member of the U.S. House of Representatives — State MICHIGAN, District 14TH
- [ ] Officer or Employee — Employing Office

Report Type
- [X] Annual (May 15)
- [ ] Amendment
- [ ] Termination — Termination Date:

A *$200 penalty* shall be assessed against anyone who files more than 30 days late.

PRELIMINARY INFORMATION — ANSWER EACH OF THESE QUESTIONS

I	Did you or your spouse have "earned" income (e.g., salaries or fees) of $200 or more from any source in the reporting period? **If yes, complete and attach Schedule I.**	Yes [X]	No [ ]	VI. Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $250 and not otherwise exempt)? **If yes, complete and attach Schedule VI.**	Yes [ ]	No [X]
II	Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? **If yes, complete and attach Schedule II.**	Yes [ ]	No [X]	VII. Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $250 from one source)? **If yes, complete and attach Schedule VII.**	Yes [X]	No [ ]
III	Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? **If yes, complete and attach Schedule III.**	Yes [X]	No [ ]	VIII. Did you hold any reportable positions on or before the date of filing in the current calendar year? **If yes, complete and attach Schedule VIII.**	Yes [ ]	No [X]
IV	Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset worth more than $1,000 in the reporting period? **If yes, complete and attach Schedule IV.**	Yes [ ]	No [X]	IX. Did you have any reportable agreement or arrangement with an outside entity? **If yes, complete and attach Schedule IX.**	Yes [ ]	No [X]
V	Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? **If yes, complete and attach Schedule V.**	Yes [X]	No [ ]	Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.		

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION — ANSWER EACH OF THESE QUESTIONS

TRUSTS—Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child?	Yes [ ]	No [X]
EXEMPTION—Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption?	Yes [ ]	No [X]

CERTIFICATION — THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended. The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct or its designee. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil penalties and criminal sanctions (*See* 5 U.S.C. app. 4, §104 and 18 U.S.C. §1001)

SIGNATURE OF REPORTING INDIVIDUAL: John Conyers Jr

DATE (Month/Day/Year): MAY 15, 1998

720

Name Rep. John Conyers, Jr	Page 2 of 5

SCHEDULE I — EARNED INCOME

List the source, type, and amount of earned income from any source (other than the filer's current employment by the U.S. Government) totalling $200 or more during the preceding calendar year. For a spouse, list the source and amount of any honoraria; list only the source for other spouse earned income exceeding $1,000.

	Source	Type	Amount
Examples	Keene State	Approved Teaching Fee	$6,000
	State of Maryland	Legislative Pension	$9,000
	Civil War Roundtable (Oct 2nd)	Spouse Speech	$1,000
	Ontario County Board of Education	Spouse Salary	NA
	Detroit Board of Education	Spouse Salary	NA

For payments to charity in lieu of honoraria, use Schedule II.

Name John Conyers, Jr. | Page 3 of 5

SCHEDULE III — ASSETS AND "UNEARNED" INCOME

BLOCK A — Asset and/or Income Source

Identify (a) each asset held for investment or production of income with a fair market value exceeding $1,000 at the end of the reporting year, and (b) any other asset or source of income which generated more than $200 in "unearned" income during the year. For rental property or land, provide an address. Provide full names of any mutual funds. For an IRA or retirement plan that is *self-directed*, list the underlying assets worth more than $1,000. For an IRA or retirement plan that is not self-directed, name the institution holding the account.

Exclude: Your personal residence(s) (unless there is rental income), any debt owed to you by your spouse, or by your or your spouse's child, parent, or sibling, any deposits totalling $5,000 or less in personal savings accounts, any financial interests in or income derived from U.S. Government retirement programs.

If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC) or is jointly held (JT), in the optional column on the far left.

BLOCK B — Value of Asset

at close of reporting year
If you use a valuation method other than fair market value, please specify the method used. If an asset was sold and is included only because it generated income, the value should be "None."

BLOCK C — Type of Income

BLOCK D — Amount of Income

For IRA's and retirement plans that are *not* self-directed, you may write in "NA" for income

BLOCK E — Transaction

Indicate if asset was purchased (P), sold (S), or exchanged (E) in reporting year

	BLOCK A	BLOCK B													BLOCK C							BLOCK D										BLOCK E
		A None	B $1 – $1,000	C $1,001 – $15,000		E $15,001 – $50,000	F $50,001 – $100,000	G $100,001 – $250,000	H $250,001 – $500,000	I $500,001 – $1,000,000	J $1,000,001 – $5,000,000	K $5,000,001 – $25,000,000	L $25,000,001 – $50,000,000	Over $50,000,000	DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Type of Income (Specify. For Example, Partnership Income or Farm Income)	I None	II $1 – $200	III $201 – $1,000	IV $1,001 – $2,500	V $2,501 – $5,000	VI $5,001 – $15,000	VII $15,001 – $50,000	VIII $50,001 – $100,000	IX $100,001 – $1,000,000	X $1,000,001 – $5,000,000	XI Over $5,000,000	
SP					SP	Mega Corp. Stock																										P, S, E
DC	*Examples*		Indefinite			Simon & Schuster		X							X															X		P
JT						1st Bank of Paducah, KY accounts			X								X					Royalties					X						
				X		Congressional Credit Union										X																	I
				X		Congressional Credit (IRA)																		-	NA	-							I

For additional assets and unearned income, use next page.

Name John Conyers, JR | Page 4 of 5

SCHEDULE V — LIABILITIES

Report liabilities of over $10,000 owed to any one creditor ***at any time*** during the reporting period by you, your spouse, or dependent child. Mark the highest amount owed during the year. **Exclude:** Any mortgage on your personal residence (unless it is rented out), loans secured by automobiles, household furniture, or appliances, and liabilities owed to a spouse, or the child, parent, or sibling of you or your spouse. Report ***revolving charge accounts*** only if the balance at the end of the reporting period exceeded $10,000.

SP, DC, JT	Creditor	Type of Liability	Amount of Liability									
			B $10,001–$15,000	C $15,001–$50,000	D $50,001–$100,000	E $100,001–$250,000	F $250,001–$500,000	G $500,001–$1,000,000	H $1,000,001–$5,000,000	I $5,000,001–$25,000,000	J $25,000,001–$50,000,000	K Over $50,000,000
	Example First Bank of Wilmington, Delaware	Mortgage on 123 Main St., Dover, Del				X						
	Comercial Bank (Det.)	Mortgage on 2727 W 7 mile Detroit, MI.			X							
	American Security (DC)	Personal	X									
	Cong. Credit Union (DC)	Personal	X									

SCHEDULE VI — GIFTS

Report the source, a brief description, and the value of all gifts totalling more than $250 received by you, your spouse, or a dependent child from any source during the year.

Exclude: Gifts from relatives, gifts of personal hospitality of an individual, local meals, and gifts to a spouse or dependent child that are totally independent of his or her relationship to you. Gifts with a value of $100 or less need not be added towards the $250 disclosure threshold.

Note: The gift rule (House Rule 51) prohibits gifts except as specifically provided in the rule.

Source	Description	Value
Example Mr. Joseph H. Smith, Anytown, Anystate	Silver Platter (determination on personal friendship received from Committee on Standards)	$270

Use additional sheets if more space is required.

Name John Conyers, JR | Page 5 of 5

SCHEDULE VII —TRAVEL PAYMENTS AND REIMBURSEMENTS

Identify the source and list travel itinerary, dates, and nature of expenses provided for travel and travel-related expenses totalling more than $250 received by you, your spouse, or a dependent child during the reporting period. Indicate whether a family member accompanied the traveler at the sponsor's expense, and the amount of time, if any, that was not at the sponsor's expense. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor.

Exclude: Travel-related expenses provided by federal, state, and local governments, or by a foreign government required to be separately reported under the Foreign Gifts and Decorations Act (5 U.S.C. § 7342); travel paid for by a Federal political committee, travel provided to a spouse or dependent child that is totally independent of his or her relationship to you.

Source	Date(s)	Point of Departure—Destination—Point of Return	Lodging? (Y/N)	Food? (Y/N)	Was a Family Member Included? (Y/N)	Any time not at sponsor's expense
Examples: Chicago Chamber of Commerce	Mar. 2	Wash., D.C.—Chicago—Wash., D.C.	N	N	N	N
Roycroft Corporation	Aug. 6–13	Wash., D.C.—Los Angeles—Cleveland	Y	Y	Y	4 Days
N'COBRA	6/27-28	DC - Chicago - Detroit	Y	Y	N	N
Southern Christian Leadership Conf.	6/27-28	Detroit - Atlanta - DC.	Y	Y	N	N
Blacks In Government	8/19-23	Detroit - DC	Y	Y	N	Y
Chicago Jazz Festival	8/31-9/1	Detroit - Chicago - DC	Y	Y	N	N
Grand Rapids Urban League	9/22-23	Detroit - DC	Y	Y	N	N
Nat. Black Political Conv. Atlanta	9/28	DC. - Chicago	N	Y	N	N
Million Woman March	10/24-26	DC - Philadelphia, Detroit	Y	Y	N	N
Women Internat. League Peace & Freedom	11/14	DC - New York - Detroit	N	N	N	N
International Jazz Hall of Fame	11/20-22	Detroit - Tampa Bay - Det.	Y	Y	N	N
Nat. Black Caucus of State Legislators	12/9-10	Detroit - Milwaukee - Detroit	Y	Y	N	N
Delta Housing Development Corp	12/14-15	Detroit - Indianapolis - Detroit	Y	Y	N	N

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UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1997

Form A
For use by Members, officers, and employees

RECEIVED - CENTER
98 MAY 15 AM 11:49

Merrill Alonzo Cook
(Full Name)

631 16th Avenue
(Mailing Address)

Salt Lake City UT 84103

Daytime Telephone
801-524-4394

MC (8)
(Office Use Only)

Filer Status: [X] Member of the U S House of Representatives — State UT, District 02 — [ ] Officer or Employee — Employing Office

Report Type: [X] Annual (May 15) — [ ] Amendment — [ ] Termination — Termination Date

A $200 penalty shall be assessed against anyone who files more than 30 days late.

PRELIMINARY INFORMATION -- ANSWER EACH OF THESE QUESTIONS

I. Did you or your spouse have "earned" income (e.g., salaries or fees) of $200 or more from any source in the reporting period?
If yes, complete and attach Schedule I. Yes [X] No [ ]

II. Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period?
If yes, complete and attach Schedule II. Yes [ ] No [X]

III. Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period?
If yes, complete and attach Schedule III. Yes [X] No [ ]

IV. Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset worth more than $1,000 in the reporting period?
If yes, complete and attach Schedule IV. Yes [X] No [ ]

V. Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period?
If yes, complete and attach Schedule V. Yes [X] No [ ]

VI. Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $250 and not otherwise exempt)?
If yes, complete and attach Schedule VI. Yes [ ] No [X]

VII. Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $250 from one source)?
If yes, complete and attach Schedule VII. Yes [X] No [ ]

VIII. Did you hold any reportable positions on or before the date of filing in the current calendar year?
If yes, complete and attach Schedule VIII. Yes [X] No [ ]

IX. Did you have any reportable agreement or arrangement with an outside entity?
If yes, complete and attach Schedule IX. Yes [X] No [ ]

Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION -- ANSWER EACH OF THESE QUESTIONS

TRUSTS - Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child? (See Instructions, pages 10-11.) Yes [ ] No [X]

EXEMPTION Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption? (See Instructions, page 11.) Yes [ ] No [X]

CERTIFICATION -- THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended. The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct or its designee. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil penalties and criminal sanctions (See 5 U.S.C. app. 4, 104 and 18 U.S.C. 1001).

SIGNATURE OF REPORTING INDIVIDUAL: Merrill Alonzo Cook

DATE (Month/Day/Year): 5/15/98

725

SCHEDULE I -- EARNED INCOME

List the source, type, and amount of earned income from any source (other than the filer's current employment by the U.S. Government) totalling $200 or more during the preceding calendar year. For a spouse, list the source and amount of any honoraria, list only the source for other spouse earned income exceeding $1,000. For further information, see Instructions, pages 12-13

	Source	Type	Amount
	Keene State	Approved Teaching Fee	$10,000
	State of Maryland	Legislative Pension	$9,000
Examples:	Civil War Roundtable (Oct 2nd)	Spouse Speech	$1,000
	Ontario County Board of Education	Spouse Salary	NA
	Cook Associates, Inc	Consulting Fee	$20,040
	Cook Associates, Inc	Spouse Professional Service Fee	$2,000

For payments to charity in lieu of honoraria, use Schedule II.

SCHEDULE III -- ASSETS AND "UNEARNED" INCOME

			BLOCK A **Asset and/or Income Source** Identify (a) each asset held for investment or production of income with a fair market value exceeding $1,000 at the end of the reporting year, and (b) any other asset or source of income which generated more than $200 In "unearned" income during the year. For rental property or land, provide an address. Provide full names of any mutual funds. For an IRA or retirement plan that is *self-directed,* list the underlying assets worth more than $1,000. For an IRA or retirement plan that is *not* self-directed, name the institution holding the account. **Exclude:** Your personal residence(s) (unless there is rental income), any debt owed to you by your spouse, or by your or your spouse's child, parent, or sibling, any deposits totalling $5,000 or less in personal savings accounts, any financial interests in or income derived from U S Government retirement programs. If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC) or is jointly held (JT), in the optional column on the far left. For further information, see Instructions, pages 14-20	BLOCK B **Value of Asset** at close of reporting year. If you use a valuation method other than fair market value, please specify the method used. If an asset was sold and is included only because it generated income, the value should be "None."	BLOCK C **Type of Income** If other than one of the listed categories, specify the type of income by writing a brief description in this block	BLOCK D **Amount of Income** For IRA's and retirement plans that are *not* self-directed, you may write in "NA" for income	BLOCK E **Transaction** Indicate if asset was purchased(P), sold(S), or exchanged(E) in reporting year
SP DC, JT	*Examples*	SP	Mega Corp. Stock 123 Main St., Dover, Del. 1st Bank of Paducah, KY accounts	$15,001 - $50,000 $250,001 - $500,000 $50,001 - $100,000	Dividends Rent Interest	$201 - $1,000 $1,001 - $2,500 $5,001 - $15,000	P
			Cook Associates, Inc	$1,000,001 - $5,000,000	Share of Corporate Earnings	$15,001 - $50,000	
			Zions/Pershing Federal Home Loan Bank Bonds	$100,001 - $250,000	Interest	$5,001 - $15,000	
			Zions/Pershing I R A	$100,001 - $250,000	Interest	$5,001 - $15,000	
			Zions/Pershing Federal Home Loan Bank Bonds	None - $1,000	Interest	$5,001 - $15,000	S
			Zions/Pershing Federal Home Loan Bank Bonds	None - $1,000	Interest	$5,001 - $15,000	S
			Zions/Pershing Federal Home Loan Bank Bonds	None - $1,000	Interest	$5,001 - $15,000	S
			Zions/Pershing Federal Home Loan Bank Bond	None - $1,000	Interest	$5,001 - $15,000	S
SP			Zions/Pershing I R A	$15,001 - $50,000	Interest	$2,501 - $5,000	
			Zions Money Market & Checking Account	$1,001 - $15,000	Interest	None - $200	

SCHEDULE IV -- TRANSACTIONS

Report any purchase, sale, or exchange by you, your spouse, or dependent child during the reporting year of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child or the purchase or sale of your personal residence, unless it is rented out. For further information, see Instructions, pages 20-21.

SP,DC,J	Asset	Type of Transaction	Date	Amount of Transaction
	Example Mega Corporation Common Stock	Purchase	10/12/94	$15,001 - $50,000
	Zions/Pershing Federal Home Loan Bank Bonds	Sold	7/28/97	$100,001 - $250,000
	Zions/Pershing Federal Home Loan Bank Bond	Sold	9/9/97	$50,001 - $100,000
	Zions/Pershing Federal Home Loan Bank Bond	Sold	9/18/97	$100,001 - $250,000
	Zions/Pershing Federal Home Loan Bank Bonds	Sold	10/7/97	$100,001 - $250,000

SCHEDULE V -- LIABILITIES

Report liabilities of over $10,000 owed to any one creditor ***at any time*** during the reporting period by you, your spouse, or dependent child. Mark the highest amount owed during the year.
Exclude: Any mortgage on your personal residence (unless it is rented out), loans secured by automobiles, household furniture, or appliances, and liabilities owed to a spouse, or the child, parent, or sibling of you or your spouse. Report ***revolving charge accounts*** only if the balance at the end of the reporting period exceeded $10,000. For further information, see instructions, pages 21-22.

SP,DC,J	Creditor	Type of Liability	Amount of Liability
	Example First Bank of Wilmington, Delaware	Mortgage on 123 Main St., Dover, Del.	$100,001 - $250,000
	Jions/Pershing Federal Home Loan Bank	Margin Acct. Against Federal Home Loan Bank Bonds. *note:highest amount owed during year was $500,001-1,000,000 while highest amount owed end of the year was $15,001-50,000	$500,001 - $1,000,000

SCHEDULE VII -- TRAVEL PAYMENTS AND REIMBURSEMENTS

Identify the source and list travel itinerary, dates, and nature of expenses provided for travel and travel-related expenses totalling more than $280 received by you, your spouse, or a dependent child during the reporting period. Indicate whether a family member accompanied the traveler at the sponsor's expense, and the amount of time, if any, that was not at the sponsor's expense. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor.

Exclude: Travel-related expenses provided by federal, state and local governments, or by a foreign government required to be separately reported under the Foreign Gifts and Decorations Act (5 U.S.C. 7342), travel paid for by a Federal political committee, travel provided to a spouse or dependent child that is totally independent of his or her relationship to you. For further information, see Instructions, pages 24-26.

	Source	Date(s)	Point of Departure--Destination--Point of Return	Lodging? (Y/N)	Food? (Y/N)	Was a Family Member Included? (Y/N)	Any time not at sponsor's expense
Examples	Chicago Chamber of Commerce	Mar 2	Wash., D.C.-Chicago-Wash., D.C.	N	N	N	N
	Mega Corporation	Aug 6-13	Wash., D.C.-Los Angeles-Cleveland	Y	Y	Y	4 Days
	American Israel Education Foundation	8/11-17/97	Salt Lake City - Tel Aviv - Salt Lake City	Y	Y	Y	No

SCHEDULE VIII -- POSITIONS

Report all positions, compensated or uncompensated, held during the current calendar year as an officer, director, trustee of an organization, partner, proprietor, representative, employee, or consultant of any corporation, firm, partnership, or other business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States. For further information, see Instructions, page 26.

Exclude: Positions held in any religious, social, fraternal, or political entities, positions solely of an honorary nature, and positions listed on Schedule I.

Position	Organization
Owner, Consultant	Cook Associates, Inc

SCHEDULE IX -- AGREEMENTS

Identify the date, parties to, and general terms of any agreement or arrangement with respect to future employment, a leave of absence during the period of government service, continuation or deferral of payments by a former or current employer other than the U.S. Government, or continuing participation in an employee welfare or benefit plan maintained by a former employer. For further information, see Instructions, pages 26-27.

Date	Parties To	Terms of Agreement
1/98	Cook Associates, Inc. & Merrill Cook	Consulting Agreement not to exceed $20,505/per year

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1997

FORM A
For use by Members, officers, and employees

RECEIVED
98 MAY 15 AM 11:54
CLERK OF THE HOUSE OF REPRESENTATIVES
MAY 11 1998
(Office Use Only)

John Charles Cooksey
(Full Name)

1310 North 19th Street
(Mailing Address)

Monroe, LA 71201

Ron W. Stewart, CPA
(318) 388-3108
Daytime Telephone

Filer Status
[X] Member of the U.S. House of Representatives — State LA, District 5th
[ ] Officer or Employee — Employing Office

Report Type
[X] Annual (May 15)
[ ] Amendment
[ ] Termination — Termination Date

A *$200 penalty* shall be assessed against anyone who files more than 30 days late.

PRELIMINARY INFORMATION — ANSWER EACH OF THESE QUESTIONS

I Did you or your spouse have "earned" income (e.g., salaries or fees) of $200 or more from any source in the reporting period? **If yes, complete and attach Schedule I.** — Yes [X] No [ ]

II Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? **If yes, complete and attach Schedule II.** — Yes [ ] No [X]

III Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? **If yes, complete and attach Schedule III.** — Yes [X] No [ ]

IV Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset worth more than $1,000 in the reporting period? **If yes, complete and attach Schedule IV.** — Yes [ ] No [X]

V Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? **If yes, complete and attach Schedule V.** — Yes [X] No [ ]

VI Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $250 and not otherwise exempt)? **If yes, complete and attach Schedule VI.** — Yes [ ] No [X]

VII Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $250 from one source)? **If yes, complete and attach Schedule VII.** — Yes [ ] No [X]

VIII Did you hold any reportable positions on or before the date of filing in the current calendar year? **If yes, complete and attach Schedule VIII.** — Yes [X] No [ ]

IX Did you have any reportable agreement or arrangement with an outside entity? **If yes, complete and attach Schedule IX.** — Yes [X] No [ ]

Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION — ANSWER EACH OF THESE QUESTIONS

TRUSTS—Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child? — Yes [ ] No [X]

EXEMPTION—Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption? — Yes [ ] No [X]

CERTIFICATION — THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended. The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct or its designee. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil penalties and criminal sanctions (*See* 5 U.S.C. app. 4, §104 and 18 U.S.C. §1001).

John Charles Cooksey
SIGNATURE OF REPORTING INDIVIDUAL

May 11, 1998
DATE (Month/Day/Year)

SCHEDULE I — EARNED INCOME

List the source, type, and amount of earned income from any source (other than the filer's current employment by the U.S. Government) totalling $200 or more during the preceding calendar year. For a spouse, list the source and amount of any honoraria; list only the source for other spouse earned income exceeding $1,000.

	Source	Type	Amount
Examples	Keene State	Approved Teaching Fee	$6,000
	State of Maryland	Legislative Pension	$9,000
	Civil War Roundtable (Oct 2nd)	Spouse Speech	$1,000
	Ontario County Board of Education	Spouse Salary	NA
	John Cooksey, M.D. & Priscilla Perry, M.D. A Medical Corporation, Monroe, LA	Salary	$20,073 *
	Hibernia Corporation, New Orleans, LA	Deferred Director's Fee	269 **

* This Amount was earned prior to becoming a Member

** This Amount Represents 2% Interest credited to a deferred compensation account. See Schedule IX - Agreements.

For payments to charity in lieu of honoraria, use Schedule II.

SCHEDULE II — PAYMENTS IN LIEU OF HONORARIA MADE TO CHARITY

List the source, activity (i.e., speech, appearance, or article), date, and amount of any payment made by the sponsor of an event to a charitable organization in lieu of an honorarium. A separate confidential list of charities receiving such payments must be filed directly with the Committee on Standards of Official Conduct. An envelope for transmitting the list is included in each Member's filing package.

Source	Activity	Date	Amount
Examples. Association of American Associations, Wash., D.C.	Speech	Feb. 2, 1997	$2,000
XYZ Magazine	Article	Aug. 13, 1997	$500
Not Applicable	N/A	N/A	N/A

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SCHEDULE III — ASSETS AND "UNEARNED" INCOME

Name: John Charles Cooksey | Page 4 of 11

BLOCK A — Asset and/or Income Source

Identify (a) each asset held for investment or production of income with a fair market value exceeding $1,000 at the end of the reporting year, and (b) any other asset or source of income which generated more than $200 in "unearned" income during the year. For rental property or land, provide an address. Provide full names of any mutual funds. For an IRA or retirement plan that is *self-directed*, list the underlying assets worth more than $1,000. For an IRA or retirement plan that is not selfdirected, name the institution holding the account.

Exclude: Your personal residence(s) (unless there is rental income), any debt owed to you by your spouse, or by your or your spouse's child, parent, or sibling, any deposits totalling $5,000 or less in personal savings accounts; any financial interests in or income derived from U.S. Government retirement programs.

If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC) or is jointly held (JT), in the optional column on the far left.

BLOCK B — Value of Asset at close of reporting year. If you use a valuation method other than fair market value, please specify the method used. If an asset was sold and is included only because it generated income, the value should be "None."

BLOCK C — Type of Income

BLOCK D — Amount of Income For IRA's and retirement plans that are *not* self-directed, you may write in "NA" for income.

BLOCK E — Transaction Indicate if asset was purchased (P), sold (S), or exchanged (E) in reporting year.

	BLOCK A	BLOCK B												BLOCK C							BLOCK D										BLOCK E
		A None	B $1 – $1,000	C $1,001 – $15,000	E $15,001 – $50,000	F $50,001 – $100,000	G $100,001 – $250,000	H $250,001 – $500,000	I $500,001 – $1,000,000	J $1,000,001 – $5,000,000	K $5,000,001 – $25,000,000	L $25,000,001 – $50,000,000	Over $50,000,000	DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Type of Income (Specify. For Example, Partnership Income or Farm Income)	I None	II $1 – $200	III $201 – $1,000	IV $1,001 – $2,500	V $2,501 – $5,000	VI $5,001 – $15,000	VII $15,001 – $50,000	VIII $50,001 – $100,000	IX $100,001 – $1,000,000	X $1,000,001 – $5,000,000	XI Over $5,000,000	P, S, E, P
SP, DC, JT	*Examples*			Indefinite		X								X		X				Royalties				X		X					P
SP	Mega Corp Stock																														
	Simon & Schuster																														
JT	1st Bank of Paducah, KY accounts					X																									
	Hibernia Bank, Monroe, LA Accounts			X												X								X							
	Caldwell Holding Company Stock				X									X								X									
	First Commerce Corporation					X								X										X							
	JBI Financial Corporation Stock			X										X								X									
	Hibernia Corporation Class A Stock			X										X								X									
	J. Cooksey, M.D. & Priscilla Perry, M.D., A Medical Corp. Common Stock								X					X							X										

For additional assets and unearned income, use next page.

SCHEDULE III — ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Name: John Charles Cooksey | Page 5 of 11

	BLOCK A	BLOCK B											BLOCK C							BLOCK D										BLOCK E
	Asset and/or Income Source	Year-End Value of Asset											Type of Income							Amount of Income										Transaction
SP OC JT		A None	B $1 - $1,000	C $1,001 - $15,000	D $15,001 - $50,000	E $50,001 - $100,000	F $100,001 - $250,000	G $250,001 - $500,000	H $500,001 - $1,000,000	I $1,000,001 - $5,000,000	J $5,000,001 - $25,000,000	K $25,000,001 - $50,000,000	L Over $50,000,000	DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Type of Income (Specify)	I None	II $1 - $200	III $201 - $1,000	IV $1,001 - $2,500	V $2,501 - $5,000	VI $5,001 - $15,000	VII $15,001 - $50,000	VIII $50,001 - $100,000	IX $100,001 - $1,000,000	X $1,000,001 - $5,000,000	XI Over $5,000,000	P, S, E
	1310 N. 19th St., Monroe, LA Medical Office & Equipment								X					X													X (Gross) X (Net)				
	304 Acre Farm, Caldwell Parish, LA Including Timber Improvements, Equipment & Livestock							X											Farm	X	(Net)				X	(Gross)					
	Caldwell Broadcasting Ltd. Partners					X													Partnership		X										
	Hallwood Energy Partners, L.P.			X															Partnership		X										
SP	Big Spenders Investment Club			X															Partnership			X									P
	Central Bank Custodian (IRA)				X									X		X	X							N/A	-	IRA					
SP	Central Bank Custodian (IRA)				X									X		X	X							N/A	-	IRA					
	Central Bank Trust Dept. Trustee For John Cooksey & Priscilla Perry, M.D., (A Medical Corporation) 401(K) Profit Sharing Plan & Trust									X				X		X	X							N/A	-	Retirement Acct.					
	Working Interest in four oil/gas wells, Franklin Parish, LA			X															Working Interest	X	(Net)		X	(Gross)							

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SCHEDULE IV — TRANSACTIONS

Report any purchase, sale, or exchange by you, your spouse, or dependent child during the reporting year of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child, or the purchase or sale of your personal residence, unless it is rented out.

SP, DC, JT	Asset	Type of Transaction: PURCHASE	SALE	EXCHANGE	Date (MO/DAY/YR)	Amount of Transaction: B ($1,001–$15,000)	C ($15,001–$50,000)	D ($50,001–$100,000)	E ($100,001–$250,000)	F ($250,001–$500,000)	G ($500,001–$1,000,000)	H ($1,000,001–$5,000,000)	I ($5,000,001–$25,000,000)	J ($25,000,001–$50,000,000)	K (Over $50,000,000)
SP	*Example.* Mega Corporation Common Stock	X			10–12–97		X								
	Not Applicable		N/A		N/A				N/A						

This page may be copied if more space is required.

SCHEDULE V — LIABILITIES

Report liabilities of over $10,000 owed to any one creditor ***at any time*** during the reporting period by you, your spouse, or dependent child. Mark the highest amount owed during the year **Exclude:** Any mortgage on your personal residence (unless it is rented out), loans secured by automobiles, household furniture, or appliances, and liabilities owed to a spouse, or the child, parent, or sibling of you or your spouse. Report ***revolving charge accounts*** only if the balance at the end of the reporting period exceeded $10,000

SP, DC, JT	Creditor	Type of Liability	Amount of Liability									
			B $10,001–$15,000	C $15,001–$50,000	D $50,001–$100,000	E $100,001–$250,000	F $250,001–$500,000	G $500,001–$1,000,000	H $1,000,001–$5,000,000	I $5,000,001–$25,000,000	J $25,000,001–$50,000,000	K Over $50,000,000
	Example First Bank of Wilmington, Delaware	Mortgage on 123 Main St , Dover, Del				X						
	Hibernia National Bank, New Orleans, LA	Line of Credit				X						
	Hibernia National Bank, New Orleans, LA	Secured by Stock of First Commerce Corporation				X						
	Caldwell Bank & Trust, Columbia, LA	Unsecured		X (Paid off in March 1997)								
	Caldwell Bank & Trust, Columbia, LA	Unsecured		X (Paid off in March 1997)								
	J. Cooksey, M.D. & Priscilla Perry, M.D. A Medical Corporation	Unsecured				X (Paid off in Dec. 1997)						

SCHEDULE VI — GIFTS

Report the source, a brief description, and the value of all gifts totalling more than $250 received by you, your spouse, or a dependent child from any source during the year

Exclude: Gifts from relatives, gifts of personal hospitality of an individual, local meals, and gifts to a spouse or dependent child that are totally independent of his or her relationship to you Gifts with a value of $100 or less need not be added towards the $250 disclosure threshold

Note: The gift rule (House Rule 51) prohibits gifts except as specifically provided in the rule

Source	Description	Value
Example Mr. Joseph H. Smith, Anytown, Anystate	Silver Platter (determination on personal friendship received from Committee on Standards)	$270
Not Applicable	N/A	N/A

Use additional sheets if more space is required.

Name	John Charles Cooksey	Page 8 of 11

SCHEDULE V — LIABILITIES

Report liabilities of over $10,000 owed to any one creditor ***at any time*** during the reporting period by you, your spouse, or dependent child. Mark the highest amount owed during the year. **Exclude:** Any mortgage on your personal residence (unless it is rented out), loans secured by automobiles, household furniture, or appliances, and liabilities owed to a spouse, or the child, parent, or sibling of you or your spouse. Report ***revolving charge accounts*** only if the balance at the end of the reporting period exceeded $10,000.

SP, DC, JT	Creditor	Type of Liability	Amount of Liability									
			B $10,001 – $15,000	C $15,001 – $50,000	D $50,001 – $100,000	E $100,001 – $250,000	F $250,001 – $500,000	G $500,001 – $1,000,000	H $1,000,001 – $5,000,000	I $5,000,001 – $25,000,000	J $25,000,001 – $50,000,000	K Over $50,000,000
	Example First Bank of Wilmington, Delaware	Mortgage on 123 Main St., Dover, Del				X						
	Central Bank, Monroe, LA	Line of Credit				X						
	Earl B. Williams, Monroe, LA	Mortgage on N. 19th St. Real Estate, Monroe, LA		X								

SCHEDULE VI — GIFTS

Report the source, a brief description, and the value of all gifts totalling more than $250 received by you, your spouse, or a dependent child from any source during the year.

Exclude: Gifts from relatives, gifts of personal hospitality of an individual, local meals, and gifts to a spouse or dependent child that are totally independent of his or her relationship to you. Gifts with a value of $100 or less need not be added towards the $250 disclosure threshold.

Note: The gift rule (House Rule 51) prohibits gifts except as specifically provided in the rule.

Source	Description	Value
Example Mr. Joseph H. Smith, Anytown, Anystate	Silver Platter (determination on personal friendship received from Committee on Standards)	$270
Not Applicable	N/A	N/A

Use additional sheets if more space is required.

SCHEDULE VII —TRAVEL PAYMENTS AND REIMBURSEMENTS

Identify the source and list travel itinerary, dates, and nature of expenses provided for travel and travel-related expenses totalling more than $250 received by you, your spouse, or a dependent child during the reporting period. Indicate whether a family member accompanied the traveler at the sponsor's expense, and the amount of time, if any, that was not at the sponsor's expense. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor

Exclude: Travel-related expenses provided by federal, state, and local governments, or by a foreign government required to be separately reported under the Foreign Gifts and Decorations Act (5 U.S.C. § 7342); travel paid for by a Federal political committee; travel provided to a spouse or dependent child that is totally independent of his or her relationship to you.

	Source	Date(s)	Point of Departure—Destination—Point of Return	Lodging? (Y/N)	Food? (Y/N)	Was a Family Member Included? (Y/N)	Any time not at sponsor's expense
Examples:	Chicago Chamber of Commerce	Mar. 2	Wash., D.C.—Chicago—Wash., D.C.	N	N	N	N
	Roycroft Corporation	Aug. 6–13	Wash., D.C.—Los Angeles—Cleveland	Y	Y	Y	4 Days
	Not Applicable	N/A	N/A			N/A	N/A

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SCHEDULE VIII — POSITIONS

Report all positions, compensated or uncompensated, held during the current calendar year as an officer, director, trustee of an organization, partner, proprietor, representative, employee, or consultant of any corporation, firm, partnership, or other business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States.

Exclude: Positions held in any religious, social, fraternal, or political entities; positions solely of an honorary nature, and positions listed on Schedule I.

Position	Name of Organization
Director/Shareholder	J. Cooksey, M.D. & Priscilla Perry, M.D., A Medical Corporation
City Advisory Director	Hibernia Corporation (No Compensation after 1996)
Limited Partner	Caldwell Broadcasting Ltd. Partners
Limited Partner	Hallwood Energy Partners, L.P.
Clinical Professor of Opthalmology	LSU School of Medicine, Shreveport and New Orleans
Courtesy Staff	St. Francis Medical Center

SCHEDULE IX — AGREEMENTS

Identify the date, parties to, and general terms of any agreement or arrangement with respect to: future employment; a leave of absence during the period of government service; continuation or deferral of payments by a former or current employer other than the U.S. Government; or continuing participation in an employee welfare or benefit plan maintained by a former employer.

Date	Parties To	Terms of Agreement
1989 To 1996	John C. Cooksey & Hibernia Corporation	"Deferred compensation plan for outside directors of Hibernia Corporation and its Subsidiaries" providing for deferral by non-employee director of annual fees for attendance at meetings of city or Advisory Boards and compensation payable to members of City or Advisory Boards who are not full-time Employees.

GPO 1998 46-260 (mac)

Use additional sheets if more space is required.

SCHEDULE VIII — POSITIONS

Report all positions, compensated or uncompensated, held during the current calendar year as an officer, director, trustee of an organization, partner, proprietor, representative, employee, or consultant of any corporation, firm, partnership, or other business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States.

Exclude: Positions held in any religious, social, fraternal, or political entities; positions solely of an honorary nature; and positions listed on Schedule I

Position	Name of Organization
Active Staff	Glenwood Regional Medical Center
Teaching & Active Staff	E. A. Conway Memorial Hospital
Active Staff	Ashley Memorial Hospital
Courtesy Staff & Visting Lecturer	John Hopkins

SCHEDULE IX — AGREEMENTS

Identify the date, parties to, and general terms of any agreement or arrangement with respect to: future employment; a leave of absence during the period of government service; continuation or deferral of payments by a former or current employer other than the U.S. Government; or continuing participation in an employee welfare or benefit plan maintained by a former employer.

Date	Parties To	Terms of Agreement
	(See Previous Page)	

GPO 1998 46-260 (mac)

Use additional sheets if more space is required.

98 MAY 15 AM 9:33

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1997

FORM A
For use by Members, officers, and employees

Jerry F. Costello
(Full Name)

629 Garden Blvd.
(Mailing Address)

Belleville, IL 62220

Wm. B. Schaltenbrand - Accountant
(618) 398-4173
Daytime Telephone

HC
(Office Use Only)

Filer Status	[X]	Member of the U S House of Representatives	State IL District 12	[ ] Officer or Employee	Employing Office
Report Type	[X]	Annual (May 15)	[ ] Amendment	[ ] Termination	Termination Date

A *$200 penalty* shall be assessed against anyone who files more than 30 days late.

PRELIMINARY INFORMATION — ANSWER EACH OF THESE QUESTIONS

I	Did you or your spouse have "earned" income (e g , salaries or fees) of $200 or more from any source in the reporting period? **If yes, complete and attach Schedule I.**	Yes [X]	No [ ]	VI Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i e , aggregating more than $250 and not otherwise exempt)? **If yes, complete and attach Schedule VI.**	Yes [ ] No [X]
II	Did any individual or organization make a donation to charity in lieu of paying you for a speech appearance, or article in the reporting period? **If yes, complete and attach Schedule II.**	Yes [ ]	No [X]	VII Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $250 from one source)? **If yes, complete and attach Schedule VII.**	Yes [X] No [ ]
III	Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? **If yes, complete and attach Schedule III.**	Yes [X]	No [ ]	VIII Did you hold any reportable positions on or before the date of filing in the current calendar year? **If yes, complete and attach Schedule VIII.**	Yes [ ] No [X]
IV	Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset worth more than $1,000 in the reporting period? **If yes, complete and attach Schedule IV.**	Yes [X]	No [ ]	IX Did you have any reportable agreement or arrangement with an outside entity? **If yes, complete and attach Schedule IX.**	Yes [ ] No [X]
V	Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? **If yes, complete and attach Schedule V.**	Yes [X]	No [ ]	**Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.**	

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION — ANSWER EACH OF THESE QUESTIONS

TRUSTS—Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child?	Yes [ ]	No [X]
EXEMPTION—Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption?	Yes [ ]	No [X]

CERTIFICATION — THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct or its designee Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil penalties and criminal sanctions (*See* 5 U S C app 4, §104 and 18 U S C §1001)

SIGNATURE OF REPORTING INDIVIDUAL
X Jerry F. Costello

DATE (Month/Day/Year)
5/13/98

SCHEDULE I — EARNED INCOME

List the source, type, and amount of earned income from any source (other than the filer's current employment by the U S Government) totalling $200 or more during the preceding calendar year. For a spouse, list the source and amount of any honoraria; list only the source for other spouse earned income exceeding $1,000.

	Source	Type	Amount
Examples	Keene State	Approved Teaching Fee	$6,000
	State of Maryland	Legislative Pension	$9,000
	Civil War Roundtable (Oct 2nd)	Spouse Speech	$1,000
	Ontario County Board of Education	Spouse Salary	NA
	Belleville PS District 118	Spouse Salary	NA

For payments to charity in lieu of honoraria, use Schedule II.

Name Jerry F. Costello | Page 3 of 8

SCHEDULE III — ASSETS AND "UNEARNED" INCOME

BLOCK A — Asset and/or Income Source

Identify (a) each asset held for investment or production of income with a fair market value exceeding $1,000 at the end of the reporting year, and (b) any other asset or source of income which generated more than $200 in "unearned" income during the year. For rental property or land, provide an address. Provide full names of any mutual funds. For an IRA or retirement plan that is *self-directed*, list the underlying assets worth more than $1,000. For an IRA or retirement plan that is not selfdirected, name the institution holding the account.

Exclude: Your personal residence(s) (unless there is rental income); any debt owed to you by your spouse, or by your or your spouse's child, parent, or sibling; any deposits totalling $5,000 or less in personal savings accounts; any financial interests in or income derived from U.S. Government retirement programs.

If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC) or is jointly held (JT), in the optional column on the far left.

BLOCK B — Value of Asset (at close of reporting year. If you use a valuation method other than fair market value, please specify the method used. If an asset was sold and is included only because it generated income, the value should be "None.")

BLOCK C — Type of Income

BLOCK D — Amount of Income (For IRA's and retirement plans that are *not* self-directed, you may write in "NA" for income)

BLOCK E — Transaction (Indicate if asset was purchased (P), sold (S), or exchanged (E) in reporting year)

	BLOCK A	BLOCK B												BLOCK C							BLOCK D										BLOCK E
		A None	B $1 – $1,000	C $1,001 – $15,000	$15,001 – $50,000	E $50,001 – $100,000	F $100,001 – $250,000	G $250,001 – $500,000	H $500,001 – $1,000,000	I $1,000,001 – $5,000,000	J $5,000,001 – $25,000,000	K $25,000,001 – $50,000,000	L Over $50,000,000	DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Type of Income (Specify. For Example: Partnership Income or Farm Income)	I None	II $1 – $200	III $201 – $1,000	IV $1,001 – $2,500	V $2,501 – $5,000	VI $5,001 – $15,000	VII $15,001 – $50,000	VIII $50,001 – $100,000	IX $100,001 – $1,000,000	X $1,000,001 – $5,000,000	XI Over $5,000,000	P, S, or E
SP, DC, JT	*Examples* SP																														
	Mega Corp Stock					X								X										X							P
	Simon & Schuster			Indefinite																Royalties											
	1st Bank of Paducah, KY accounts						X									X									X						
	West Pointe Bancorp, Inc.- Stock - IRA				X									X							NA - IRA										
SP	West Pointe Bancorp, Inc.- Stock - IRA				X									X							NA - IRA										

For additional assets and unearned income, use next page.

SCHEDULE III — ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Name: Jerry F. Costello

SP, DC, JT	BLOCK A: Asset and/or Income Source	BLOCK B: Year-End Value of Asset												BLOCK C: Type of Income							BLOCK D: Amount of Income											BLOCK E: Transaction
		A None	B $1 - $1,000	C $1,001 - $15,000	D $15,001 - $50,000	E $50,001 - $100,000	F $100,001 - $250,000	G $250,001 - $500,000	H $500,001 - $1,000,000	I $1,000,001 - $5,000,000	J $5,000,001 - $25,000,000	K $25,000,001 - $50,000,000	L Over $50,000,000	DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Type of Income (Specify)	I None	II $1 - $200	III $201 - $1,000	IV $1,001 - $2,500	V $2,501 - $5,000	VI $5,001 - $15,000	VII $15,001 - $50,000	VIII $50,001 - $100,000	IX $100,001 - $1,000,000	X $1,000,001 - $5,000,000	XI Over $5,000,000	P, S, E
	Putnam International - New Opportunities Fund - CL A - IRA			X										X								NA - IRA									
SP	Putnam International - New Opportunities Fund - CL A - IRA			X										X								NA - IRA									
	State of Illinois				X											Illinois Retirement					X										
SP	State of Illinois				X											Illinois Teacher's Retirement					X										
	Congressional Federal Credit Union		X													X						X									
JT	Magna Group, Inc. - Stock			X										X								X									Inherited
	Pilot Short - Term Diversified Asset Fund	X														X						X									
	Nations Prime Fund Primary A	X														X						X									
	Boatman's Trust Company Taxable Bond Fund	X														* X	* X					** X									S

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SCHEDULE III — ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Name Jerry F. Costello

SP. DC. JT	BLOCK A Asset and/or Income Source	BLOCK B Year-End Value of Asset											BLOCK C Type of Income							BLOCK D Amount of Income										BLOCK E Transaction
		A None	B $1 – $1,000	C $1,001 – $15,000	D $15,001 – $50,000	E $50,001 – $100,000	F $100,001 – $250,000	G $250,001 – $500,000	H $500,001 – $1,000,000	I $1,000,001 – $5,000,000	J $5,000,001 – $25,000,000	K $25,000,001 – $50,000,000	L Over $50,000,000	DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Type of Income (Specify)	I None	II $1 – $200	III $201 – $1,000	IV $1,001 – $2,500	V $2,501 – $5,000	VI $5,001 – $15,000	VII $15,001 – $50,000	VIII $50,001 – $100,000	IX $100,001 – $1,000,000	X $1,000,001 – $5,000,000	XI Over $5,000,000	P, S, E
	Boatmen's First National Bank of Kansas City	X													* X		* X				** X									S
	Rental House - 121 Christine Dr., Belleville, IL 62221					X									X											X					***
*	The Fund Generated Both Interest Income and Capital Gains or Losses																														
**	Interest Income Plus/ Minus Net Capital Gains or Losses																														
***	Property Converted From Secondary Residence to Rental Property Effective 1-1-97																														

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SCHEDULE IV — TRANSACTIONS

Name Jerry F. Costello | Page 6 of 8

Report any purchase, sale, or exchange by you, your spouse, or dependent child during the reporting year of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child, or the purchase or sale of your personal residence, unless it is rented out

SP, DC, JT	Asset	Type of Transaction: PURCHASE	SALE	EXCHANGE	Date (MO/DAY/YR)	Amount of Transaction: B ($1,001–$15,000)	C ($15,001–$50,000)	D ($50,001–$100,000)	E ($100,001–$250,000)	F ($250,001–$500,000)	G ($500,001–$1,000,000)	H ($1,000,001–$5,000,000)	I ($5,000,001–$25,000,000)	J ($25,000,001–$50,000,000)	K (Over $50,000,000)
SP	*Example* Mega Corporation Common Stock	X			10-12-97		X								
	Boatmen's Trust Co. Taxable Bond Fund		X		5-30-97	X									
	Boatmen's First National Bank of Kansas City		X		3-14-97	X									
	Boatmen's First National Bank of Kansas City		X		5-30-97	X									

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SCHEDULE V — LIABILITIES

Report liabilities of over $10,000 owed to any one creditor ***at any time*** during the reporting period by you, your spouse, or dependent child. Mark the highest amount owed during the year. **Exclude:** Any mortgage on your personal residence (unless it is rented out), loans secured by automobiles, household furniture, or appliances, and liabilities owed to a spouse, or the child, parent, or sibling of you or your spouse. Report ***revolving charge accounts*** only if the balance at the end of the reporting period exceeded $10,000.

SP, DC, JT	Creditor	Type of Liability	Amount of Liability B ($10,001–$15,000)	C ($15,001–$50,000)	D ($50,001–$100,000)	E ($100,001–$250,000)	F ($250,001–$500,000)	G ($500,001–$1,000,000)	H ($1,000,001–$5,000,000)	I ($5,000,001–$25,000,000)	J ($25,000,001–$50,000,000)	K (Over $50,000,000)
Example	First Bank of Wilmington, Delaware	Mortgage on 123 Main St., Dover, Del				X						
	West Pointe Bank & Trust Co.	Mortgage on 121 Christine Dr., Belleville, IL		X								
	Jenner & Block	Legal Fees	X									

SCHEDULE VI — GIFTS

Report the source, a brief description, and the value of all gifts totalling more than $250 received by you, your spouse, or a dependent child from any source during the year.

Exclude: Gifts from relatives, gifts of personal hospitality of an individual, local meals, and gifts to a spouse or dependent child that are totally independent of his or her relationship to you. Gifts with a value of $100 or less need not be added towards the $250 disclosure threshold.

Note: The gift rule (House Rule 51) prohibits gifts except as specifically provided in the rule.

Source	Description	Value
Example: Mr. Joseph H. Smith, Anytown, Anystate	Silver Platter (determination on personal friendship received from Committee on Standards)	$270

Use additional sheets if more space is required.

SCHEDULE VII —TRAVEL PAYMENTS AND REIMBURSEMENTS

Identify the source and list travel itinerary, dates, and nature of expenses provided for travel and travel-related expenses totalling more than $250 received by you, your spouse, or a dependent child during the reporting period. Indicate whether a family member accompanied the traveler at the sponsor's expense, and the amount of time, if any, that was not at the sponsor's expense. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor.

Exclude: Travel-related expenses provided by federal, state, and local governments, or by a foreign government required to be separately reported under the Foreign Gifts and Decorations Act (5 U.S.C. § 7342); travel paid for by a Federal political committee; travel provided to a spouse or dependent child that is totally independent of his or her relationship to you.

Source	Date(s)	Point of Departure—Destination—Point of Return	Lodging? (Y/N)	Food? (Y/N)	Was a Family Member Included? (Y/N)	Any time not at sponsor's expense
Examples: Chicago Chamber of Commerce	Mar 2	Wash , D C —Chicago—Wash., D C	N	N	N	N
Roycroft Corporation	Aug 6–13	Wash , D C —Los Angeles—Cleveland	Y	Y	Y	4 Days
Jewish Federation of Southern Illinois	Aug. 13-20	St. Louis - Israel - St. Louis	Y	Y	Y	N

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UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1997

FORM A
For use by Members, officers, and employees

93 MAY 15 PM 4:30

Christopher Cox
(Full Name)

2402 Rayburn House Office Building
(Mailing Address)

202-225-5611
Daytime Telephone

Washington, DC 20515

(9)

MC HAND DELIVERED
(Office Use Only)

Filer Status
[X] Member of the U.S. House of Representatives — State CA District 47
[ ] Officer or Employee — Employing Office

Report Type
[ ] Annual (May 15)
[ ] Amendment
[ ] Termination — Termination Date

A *$200 penalty* shall be assessed against anyone who files more than 30 days late.

PRELIMINARY INFORMATION — ANSWER EACH OF THESE QUESTIONS

I Did you or your spouse have "earned" income (e.g., salaries or fees) of $200 or more from any source in the reporting period? **If yes, complete and attach Schedule I.** Yes [X] No [ ]

II Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? **If yes, complete and attach Schedule II.** Yes [ ] No [X]

III Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? **If yes, complete and attach Schedule III.** Yes [X] No [ ]

IV Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset worth more than $1,000 in the reporting period? **If yes, complete and attach Schedule IV.** Yes [X] No [ ]

V Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? **If yes, complete and attach Schedule V.** Yes [ ] No [X]

VI Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $250 and not otherwise exempt)? **If yes, complete and attach Schedule VI.** Yes [ ] No [X]

VII Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $250 from one source)? **If yes, complete and attach Schedule VII.** Yes [X] No [ ]

VIII Did you hold any reportable positions on or before the date of filing in the current calendar year? **If yes, complete and attach Schedule VIII.** Yes [X] No [ ]

IX Did you have any reportable agreement or arrangement with an outside entity? **If yes, complete and attach Schedule IX.** Yes [ ] No [X]

Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION — ANSWER EACH OF THESE QUESTIONS

TRUSTS—Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child? Yes [ ] No [X]

EXEMPTION—Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption? Yes [ ] No [X]

CERTIFICATION — THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended. The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct or its designee. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil penalties and criminal sanctions (*See* 5 U.S.C. app. 4, §104 and 18 U.S.C. §1001).

SIGNATURE OF REPORTING INDIVIDUAL: Christopher Cox

DATE (Month/Day/Year): May 15, 1998

752

SCHEDULE I — EARNED INCOME

List the source, type, and amount of earned income from any source (other than the filer's current employment by the U.S. Government) totalling $200 or more during the preceding calendar year. For a spouse, list the source and amount of any honoraria, list only the source for other spouse earned income exceeding $1,000.

	Source	Type	Amount
Examples	Keene State	Approved Teaching Fee	$6,000
	State of Maryland	Legislative Pension	$9,000
	Civil War Roundtable (Oct. 2nd)	Spouse Speech	$1,000
	Ontario County Board of Education	Spouse Salary	NA
	Continental Airlines	Spouse Compensation	N/A

For payments to charity in lieu of honoraria, use Schedule II.

SCHEDULE II — PAYMENTS IN LIEU OF HONORARIA MADE TO CHARITY

List the source, activity (i.e., speech, appearance, or article), date, and amount of any payment made by the sponsor of an event to a charitable organization in lieu of an honorarium. A separate confidential list of charities receiving such payments must be filed directly with the Committee on Standards of Official Conduct. An envelope for transmitting the list is included in each Member's filing package

Source	Activity	Date	Amount
Examples Association of American Associations, Wash., D.C.	Speech	Feb 2, 1997	$2,000
XYZ Magazine	Article	Aug 13, 1997	$500
N/A			

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SCHEDULE III — ASSETS AND "UNEARNED" INCOME

Name Christopher Cox

BLOCK A — Asset and/or Income Source

Identify (a) each asset held for investment or production of income with a fair market value exceeding $1,000 at the end of the reporting year, and (b) any other asset or source of income which generated more than $200 in "unearned" income during the year. For rental property or land, provide an address. Provide full names of any mutual funds. For an IRA or retirement plan that is *self-directed*, list the underlying assets worth more than $1,000. For an IRA or retirement plan that is not selfdirected, name the institution holding the account.

Exclude: Your personal residence(s) (unless there is rental income), any debt owed to you by your spouse, or by your or your spouse's child, parent, or sibling; any deposits totalling $5,000 or less in personal savings accounts, any financial interests in or income derived from U.S. Government retirement programs.

If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC) or is jointly held (JT), in the optional column on the far left.

BLOCK B — Value of Asset

at close of reporting year. If you use a valuation method other than fair market value, please specify the method used. If an asset was sold and is included only because it generated income, the value should be "None."

BLOCK C — Type of Income

BLOCK D — Amount of Income

For IRA's and retirement plans that are *not* self-directed, you may write in "NA" for income.

BLOCK E — Transaction

Indicate if asset was purchased (P), sold (S), or exchanged (E) in reporting year.

	BLOCK A	BLOCK B	BLOCK C	BLOCK D	BLOCK E
		A None; B $1 – $1,000; C $1,001 – $15,000; E $15,001 – $50,000; F $50,001 – $100,000; G $100,001 – $250,000; H $250,001 – $500,000; I $500,001 – $1,000,000; J $1,000,001 – $5,000,000; K $5,000,001 – $25,000,000; L $25,000,001 – $50,000,000; Over $50,000,000	DIVIDENDS; RENT; INTEREST; CAPITAL GAINS; EXCEPTED TRUST; QUALIFIED BLIND TRUST; Other Type of Income (Specify. For Example: Partnership Income or Farm Income)	I None; II $1 – $200; III $201 – $1,000; IV $1,001 – $2,500; V $2,501 – $5,000; VI $5,001 – $15,000; VII $15,001 – $50,000; VIII $50,001 – $100,000; IX $100,001 – $1,000,000; X $1,000,001 – $5,000,000; XI Over $5,000,000	P, S, E
SP DC JT	*Examples* SP Mega Corp. Stock Simon & Schuster 1st Bank of Paducah, KY accounts	Indefinite	X X Royalties	VI IX II	P
	IRA: Dean Witter Money Market	C X	DIVIDENDS X	III X	S
SP	IRA: Fidelity Magellan Fund	E X	DIVIDENDS X	V X	
	IRA: Smith Barney Mon Mkt	C X			
JT	Dean Witter CA Trust Mon Mkt	F X	DIVIDENDS X	II X	P
JT	Smith Barney CA Municipal Fund	H X	DIVIDENDS X	VII X	
			DIVIDENDS X	III X	P

For additional assets and unearned income, use next page.

SCHEDULE III — ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Name Christopher Cox | Page 5 of 9

SP, DC, JT	BLOCK A: Asset and/or Income Source	BLOCK B: Year-End Value of Asset												BLOCK C: Type of Income							BLOCK D: Amount of Income										BLOCK E: Transaction		
		A None	B $1 – $1,000	C $1,001 – $15,000	D $15,001 – $50,000	E $50,001 – $100,000	F $100,001 – $250,000	G $250,001 – $500,000	H $500,001 – $1,000,000	I $1,000,001 – $5,000,000	J $5,000,001 – $25,000,000	K $25,000,001 – $50,000,000	L Over $50,000,000	DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Type of Income (Specify)	I None	II $1 – $200	III $201 – $1,000	IV $1,001 – $2,500	V $2,501 – $5,000	VI $5,001 – $15,000	VII $15,001 – $50,000	VIII $50,001 – $100,000	IX $100,001 – $1,000,000	X $1,000,001 – $5,000,000	XI Over $5,000,000	P	S	E
SP	Continental Airlines, Inc (Retirement Plan)					X								X			X								X								
SP	Calvert Tax-Free Reserves (money market Account)							X						X												X							
SP	MFS Int. Income Fund			X										X									X										
SP	AZ Trans Bd. Revenue Bonds				X																X												
SP	Bradenton FL Utilities Bonds				X																X												
SP	GA muni. Electric Authority				X									X											X								
SP	GA Muni Electric Authority Ser.				X																X												
SP	Clark County, NV SD Bonds				X																X												
	American Eagle Coins			X																													
	Coca Cola Co. Common Stock				X									X								X											

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SCHEDULE IV — TRANSACTIONS

Name Christopher Cox | Page 6 of 9

Report any purchase, sale, or exchange by you, your spouse, or dependent child during the reporting year of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child, or the purchase or sale of your personal residence, unless it is rented out.

SP, DC, JT	Asset	Type of Transaction: PURCHASE	SALE	EXCHANGE	Date (MO/DAY/YR)	Amount of Transaction: B ($1,001–$15,000)	C ($15,001–$50,000)	D ($50,001–$100,000)	E ($100,001–$250,000)	F ($250,001–$500,000)	G ($500,001–$1,000,000)	H ($1,000,001–$5,000,000)	I ($5,000,001–$25,000,000)	J ($25,000,001–$50,000,000)	K (Over $50,000,000)
SP	*Example* Mega Corporation Common Stock	X			10-12-97		X								
	Dean Witter IRA (money market account)		X		12-18-97	X									
	Smith Barney IRA (money market account)	X			12-18-97	X									

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SCHEDULE V — LIABILITIES

Report liabilities of over $10,000 owed to any one creditor ***at any time*** during the reporting period by you, your spouse, or dependent child. Mark the highest amount owed during the year. **Exclude:** Any mortgage on your personal residence (unless it is rented out), loans secured by automobiles, household furniture, or appliances; and liabilities owed to a spouse, or the child, parent, or sibling of you or your spouse. Report ***revolving charge accounts*** only if the balance at the end of the reporting period exceeded $10,000.

SP, DC, JT	Creditor	Type of Liability	Amount of Liability									
			B $10,001 – $15,000	C $15,001 – $50,000	D $50,001 – $100,000	E $100,001 – $250,000	F $250,001 – $500,000	G $500,001 – $1,000,000	H $1,000,001 – $5,000,000	I $5,000,001 – $25,000,000	J $25,000,001 – $50,000,000	K Over $50,000,000
Example	First Bank of Wilmington, Delaware	Mortgage on 123 Main St., Dover, Del.				x						
	N/A											

SCHEDULE VI — GIFTS

Report the source, a brief description, and the value of all gifts totalling more than $250 received by you, your spouse, or a dependent child from any source during the year.

Exclude: Gifts from relatives, gifts of personal hospitality of an individual, local meals, and gifts to a spouse or dependent child that are totally independent of his or her relationship to you. Gifts with a value of $100 or less need not be added towards the $250 disclosure threshold.

Note: The gift rule (House Rule 51) prohibits gifts except as specifically provided in the rule.

Source	Description	Value
Example Mr. Joseph H. Smith, Anytown, Anystate	Silver Platter (determination on personal friendship received from Committee on Standards)	$270
N/A		

Use additional sheets if more space is required.

SCHEDULE VII —TRAVEL PAYMENTS AND REIMBURSEMENTS

Identify the source and list travel itinerary, dates, and nature of expenses provided for travel and travel-related expenses totalling more than $250 received by you, your spouse, or a dependent child during the reporting period. Indicate whether a family member accompanied the traveler at the sponsor's expense, and the amount of time, if any, that was not at the sponsor's expense. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor.

Exclude: Travel-related expenses provided by federal, state, and local governments, or by a foreign government required to be separately reported under the Foreign Gifts and Decorations Act (5 U.S.C. § 7342); travel paid for by a Federal political committee; travel provided to a spouse or dependent child that is totally independent of his or her relationship to you.

Source		Date(s)	Point of Departure—Destination—Point of Return	Lodging? (Y/N)	Food? (Y/N)	Was a Family Member Included? (Y/N)	Any time not at sponsor's expense
Examples	Chicago Chamber of Commerce	Mar. 2	Wash., D.C.—Chicago—Wash., D.C.	N	N	N	N
	Roycroft Corporation	Aug. 6–13	Wash., D.C.—Los Angeles—Cleveland	Y	Y	Y	4 Days
The Congressional Institute (House Leadership Meetings)		Jan. 21-23	Wash., DC-Warrenton, VA-DC	Y	Y	N	N

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SCHEDULE VIII — POSITIONS

Report all positions, compensated or uncompensated, held during the current calendar year as an officer, director, trustee of an organization, partner, proprietor, representative, employee, or consultant of any corporation, firm, partnership, or other business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States

Exclude: Positions held in any religious, social, fraternal, or political entities; positions solely of an honorary nature; and positions listed on Schedule I.

Position	Name of Organization
Trustee	Chapman University
Advisory Board	UC-Irvine Brain Imaging Center
Advisory Council	Laguna Canyon Foundation
National Advisory Board	Childhelp USA
Cong. Advisory Board	Citizens Against Government Waste
Advisory Board	Orange County YMCA
Advisory Board	Orange Coast Association
Advisory Board	Center for Security Policy
Cong. Advisory Board--Leadership Institute	

SCHEDULE IX — AGREEMENTS

Identify the date, parties to, and general terms of any agreement or arrangement with respect to: future employment; a leave of absence during the period of government service; continuation or deferral of payments by a former or current employer other than the U.S. Government; or continuing participation in an employee welfare or benefit plan maintained by a former employer.

Date	Parties To	Terms of Agreement

GPO 1998 46-260 (mac)

Use additional sheets if more space is required.

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1997

FORM A
For use by Members, officers, and employees

98 MAY 13 PM 4:13

William J. Coyne
(Full Name)

2455 Rayburn HOB
Washington, D.C. 20515
(Mailing Address)

Daytime Telephone: 202-225-2301

(6)

HC (Office Use Only)

Filer Status	[XX] Member of the U.S. House of Representatives	State PA District 14th	[ ] Officer or Employee	Employing Office	**A *$200 penalty* shall be assessed against anyone who files more than 30 days late.**
Report Type	[XX] Annual (May 15)	[ ] Amendment	[ ] Termination	Termination Date	

PRELIMINARY INFORMATION — ANSWER EACH OF THESE QUESTIONS

I. Did you or your spouse have "earned" income (e.g., salaries or fees) of $200 or more from any source in the reporting period? **If yes, complete and attach Schedule I.**	Yes [ ]	No [X]	VI. Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $250 and not otherwise exempt)? **If yes, complete and attach Schedule VI.**	Yes [ ]	No [X]
II. Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? **If yes, complete and attach Schedule II.**	Yes [ ]	No [X]	VII. Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $250 from one source)? **If yes, complete and attach Schedule VII.**	Yes [ ]	No [X]
III. Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? **If yes, complete and attach Schedule III.**	Yes [XX]	No [ ]	VIII. Did you hold any reportable positions on or before the date of filing in the current calendar year? **If yes, complete and attach Schedule VIII.**	Yes [X]	No [ ]
IV. Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset worth more than $1,000 in the reporting period? **If yes, complete and attach Schedule IV.**	Yes [ ]	No [X]	IX. Did you have any reportable agreement or arrangement with an outside entity? **If yes, complete and attach Schedule IX.**	Yes [ ]	No [X]
V. Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? **If yes, complete and attach Schedule V.**	Yes [ ]	No [X]	**Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.**		

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION — ANSWER EACH OF THESE QUESTIONS

TRUSTS—Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child?	Yes [ ]	No [X]
EXEMPTION—Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption?	Yes [ ]	No [X]

CERTIFICATION — THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended. The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct or its designee. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil penalties and criminal sanctions (*See* 5 U.S.C. app. 4, §104 and 18 U.S.C. §1001).

SIGNATURE OF REPORTING INDIVIDUAL: William J. Coyne

DATE (Month/Day/Year): 5/13/98

Name	William J. Coyne	Page 2 of 8

SCHEDULE I — EARNED INCOME

List the source, type, and amount of earned income from any source (other than the filer's current employment by the U.S. Government) totalling $200 or more during the preceding calendar year. For a spouse, list the source and amount of any honoraria; list only the source for other spouse earned income exceeding $1,000.

	Source	Type	Amount
Examples	Keene State	Approved Teaching Fee	$6,000
	State of Maryland	Legislative Pension	$9,000
	Civil War Roundtable (Oct 2nd)	Spouse Speech	$1,000
	Ontario County Board of Education	Spouse Salary	NA
	NONE		

For payments to charity in lieu of honoraria, use Schedule II.

SCHEDULE II — PAYMENTS IN LIEU OF HONORARIA MADE TO CHARITY

List the source, activity (i.e., speech, appearance, or article), date, and amount of any payment made by the sponsor of an event to a charitable organization in lieu of an honorarium. A separate confidential list of charities receiving such payments must be filed directly with the Committee on Standards of Official Conduct. An envelope for transmitting the list is included in each Member's filing package.

	Source	Activity	Date	Amount
Examples	Association of American Associations, Wash , D C	Speech	Feb 2, 1997	$2,000
	XYZ Magazine	Article	Aug 13, 1997	$500
	NONE			

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Name William J. Coyne | Page 4 of 8

SCHEDULE III — ASSETS AND "UNEARNED" INCOME

BLOCK A — Asset and/or Income Source

Identify (a) each asset held for investment or production of income with a fair market value exceeding $1,000 at the end of the reporting year, and (b) any other asset or source of income which generated more than $200 in "unearned" income during the year. For rental property or land, provide an address. Provide full names of any mutual funds. For an IRA or retirement plan that is *self-directed*, list the underlying assets worth more than $1,000. For an IRA or retirement plan that is not selfdirected, name the institution holding the account.

Exclude: Your personal residence(s) (unless there is rental income), any debt owed to you by your spouse, or by your or your spouse's child, parent, or sibling, any deposits totalling $5,000 or less in personal savings accounts; any financial interests in or income derived from U.S. Government retirement programs.

If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC) or is jointly held (JT), in the optional column on the far left

BLOCK B — Value of Asset at close of reporting year. If you use a valuation method other than fair market value, please specify the method used. If an asset was sold and is included only because it generated income, the value should be "None."

BLOCK C — Type of Income

BLOCK D — Amount of Income For IRA's and retirement plans that are *not* self-directed, you may write in "NA" for income

BLOCK E — Transaction Indicate if asset was purchased (P), sold (S), or exchanged (E) in reporting year

	BLOCK A		BLOCK B												BLOCK C							BLOCK D											BLOCK E
			A None	B $1 – $1,000	C $1,001 – $15,000	$15,001 – $50,000	E $50,001 – $100,000	F $100,001 – $250,000	G $250,001 – $500,000	H $500,001 – $1,000,000	I $1,000,001 – $5,000,000	J $5,000,001 – $25,000,000	K $25,000,001 – $50,000,000	L Over $50,000,000	DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Type of Income (Specify. For Example: Partnership income or Farm Income)	I None	II $1 – $200	III $201 – $1,000	IV $1,001 – $2,500	V $2,501 – $5,000	VI $5,001 – $15,000	VII $15,001 – $50,000	VIII $50,001 – $100,000	IX $100,001 – $1,000,000	X $1,000,001 – $5,000,000	XI Over $5,000,000	P, S, E
SP, DC, JT		SP																															
	Examples		Indefinite				X								X		X				Royalties								X				P
	Pittsburgh National Bank						X										X									X							
	Wright Patman Federal Credit Union							X									X										X						
	Dollar Savings Bank						X										X									X							
	U.S. Treasury Note					X											X							X									

For additional assets and unearned income, use next page.

SCHEDULE IV — TRANSACTIONS

Name William J. Coyne | Page 5 of 8

Report any purchase, sale, or exchange by you, your spouse, or dependent child during the reporting year of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child, or the purchase or sale of your personal residence, unless it is rented out.

SP, DC, JT	Asset	Type of Transaction: PURCHASE	SALE	EXCHANGE	Date (MO/DAY/YR)	Amount of Transaction: B $1,001–$15,000	C $15,001–$50,000	D $50,001–$100,000	E $100,001–$250,000	F $250,001–$500,000	G $500,001–$1,000,000	H $1,000,001–$5,000,000	I $5,000,001–$25,000,000	J $25,000,001–$50,000,000	K Over $50,000,000
SP	*Example:* Mega Corporation Common Stock	X			10–12–97		X								
	None														

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SCHEDULE V — LIABILITIES

Report liabilities of over $10,000 owed to any one creditor ***at any time*** during the reporting period by you, your spouse, or dependent child. Mark the highest amount owed during the year. **Exclude:** Any mortgage on your personal residence (unless it is rented out), loans secured by automobiles, household furniture, or appliances, and liabilities owed to a spouse, or the child, parent, or sibling of you or your spouse. Report ***revolving charge accounts*** only if the balance at the end of the reporting period exceeded $10,000.

SP, DC, JT	Creditor	Type of Liability	Amount of Liability										
			B $10,001–$15,000	C $15,001–$50,000	D $50,001–$100,000	E $100,001–$250,000	F $250,001–$500,000	G $500,001–$1,000,000	H $1,000,001–$5,000,000	I $5,000,001–$25,000,000	J $25,000,001–$50,000,000	K Over $50,000,000
	Example First Bank of Wilmington, Delaware	Mortgage on 123 Main St., Dover, Del				X						
	None											

SCHEDULE VI — GIFTS

Report the source, a brief description, and the value of all gifts totalling more than $250 received by you, your spouse, or a dependent child from any source during the year.

Exclude: Gifts from relatives, gifts of personal hospitality of an individual, local meals, and gifts to a spouse or dependent child that are totally independent of his or her relationship to you. Gifts with a value of $100 or less need not be added towards the $250 disclosure threshold.

Note: The gift rule (House Rule 51) prohibits gifts except as specifically provided in the rule.

Source	Description	Value
Example Mr. Joseph H. Smith, Anytown, Anystate	Silver Platter (determination on personal friendship received from Committee on Standards)	$270
NONE		

Use additional sheets if more space is required.

SCHEDULE VII —TRAVEL PAYMENTS AND REIMBURSEMENTS

Identify the source and list travel itinerary, dates, and nature of expenses provided for travel and travel-related expenses totalling more than $250 received by you, your spouse, or a dependent child during the reporting period. Indicate whether a family member accompanied the traveler at the sponsor's expense, and the amount of time, if any, that was not at the sponsor's expense. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor.

Exclude: Travel-related expenses provided by federal, state, and local governments, or by a foreign government required to be separately reported under the Foreign Gifts and Decorations Act (5 U.S.C. § 7342); travel paid for by a Federal political committee, travel provided to a spouse or dependent child that is totally independent of his or her relationship to you.

Source		Date(s)	Point of Departure—Destination—Point of Return	Lodging? (Y/N)	Food? (Y/N)	Was a Family Member Included? (Y/N)	Any time not at sponsor's expense
Examples:	Chicago Chamber of Commerce	Mar. 2	Wash., D.C.—Chicago—Wash., D.C.	N	N	N	N
	Roycroft Corporation	Aug. 6–13	Wash., D.C.—Los Angeles—Cleveland	Y	Y	Y	4 Days
None							

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SCHEDULE VIII — POSITIONS

Report all positions, compensated or uncompensated, held during the current calendar year as an officer, director, trustee of an organization, partner, proprietor, representative, employee, or consultant of any corporation, firm, partnership, or other business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States.

Exclude: Positions held in any religious, social, fraternal, or political entities; positions solely of an honorary nature; and positions listed on Schedule I

Position	Name of Organization
Board Member	YMCA of Pittsburgh
Board Member	Flax Trust
Board Member	Duquense University Beard Center for Leadership in Ethics
	Advisory Board

SCHEDULE IX — AGREEMENTS

Identify the date, parties to, and general terms of any agreement or arrangement with respect to: future employment; a leave of absence during the period of government service; continuation or deferral of payments by a former or current employer other than the U.S. Government; or continuing participation in an employee welfare or benefit plan maintained by a former employer.

Date	Parties To	Terms of Agreement
	NONE	

GPO 1998 46-260 (mac)

Use additional sheets if more space is required.

98 MAY 13 PM 3:25

(6)

HC (Office Use Only)

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1997

FORM A
For use by Members, officers, and employees

Robert E. Cramer, Jr.
(Full Name)

417 Eustis Avenue
(Mailing Address)

Huntsville, AL 35801

Daytime Telephone: 202/225-4801

Filer Status
[X] Member of the U S House of Representatives — State Alabama District #5
[ ] Officer or Employee — Employing Office

Report Type
[X] Annual (May 15)
[ ] Amendment
[ ] Termination — Termination Date

A *$200 penalty* shall be assessed against anyone who files more than 30 days late.

PRELIMINARY INFORMATION — ANSWER EACH OF THESE QUESTIONS

I Did you or your spouse have "earned" income (e g , salaries or fees) of $200 or more from any source in the reporting period? **If yes, complete and attach Schedule I.** — Yes [ ] No [X]

II Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? **If yes, complete and attach Schedule II.** — Yes [X] No [ ]

III Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? **If yes, complete and attach Schedule III.** — Yes [X] No [ ]

IV Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset worth more than $1,000 in the reporting period? **If yes, complete and attach Schedule IV.** — Yes [ ] No [XX]

V Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? **If yes, complete and attach Schedule V.** — Yes [XX] No [ ]

VI Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i e , aggregating more than $250 and not otherwise exempt)? **If yes, complete and attach Schedule VI.** — Yes [ ] No [XX]

VII Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $250 from one source)? **If yes, complete and attach Schedule VII.** — Yes [XX] No [ ]

VIII Did you hold any reportable positions on or before the date of filing in the current calendar year? **If yes, complete and attach Schedule VIII.** — Yes [XX] No [ ]

IX Did you have any reportable agreement or arrangement with an outside entity? **If yes, complete and attach Schedule IX.** — Yes [ ] No [XX]

Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION — ANSWER EACH OF THESE QUESTIONS

TRUSTS—Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child? — Yes [ ] No [X]

EXEMPTION--Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption? — Yes [ ] No [X]

CERTIFICATION — THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct or its designee Any individual who knowingly and willfully falsifies or who knowingly and willfully fails to file this report may be subject to civil penalties and criminal sanctions (*See* 5 U S C app 4, §104 and 18 U S C §1001)

SIGNATURE OF REPORTING INDIVIDUAL Robert E. Cramer

DATE (Month/Day/Year) 5-12-98

RECEIVED

Name Robert E. Cramer, Jr.	Page 2 of 6

SCHEDULE II — PAYMENTS IN LIEU OF HONORARIA MADE TO CHARITY

List the source, activity (i e , speech, appearance, or article), date, and amount of any payment made by the sponsor of an event to a charitable organization in lieu of an honorarium. A separate confidential list of charities receiving such payments must be filed directly with the Committee on Standards of Official Conduct. An envelope for transmitting the list is included in each Member's filing package

Source	Activity	Date	Amount
Examples Association of American Associations, Wash., D C XYZ Magazine	Speech Article	Feb 2, 1997 Aug 13 1997	$2 000 $500
Northeast Alabama State Community College	speech	May 28, 1997	$300
Soros Foundation	speech	December 4, 1997	$1500

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Name	Robert E. Cramer, Jr.	Page	3 of 6

SCHEDULE III — ASSETS AND "UNEARNED" INCOME

BLOCK A — Asset and/or Income Source

Identify (a) each asset held for investment or production of income with a fair market value exceeding $1,000 at the end of the reporting year, and (b) any other asset or source of income which generated more than $200 in "unearned" income during the year. For rental property or land, provide an address. Provide full names of any mutual funds. For an IRA or retirement plan that is *self-directed*, list the underlying assets worth more than $1,000. For an IRA or retirement plan that is not self-directed, name the institution holding the account.

Exclude: Your personal residence(s) (unless there is rental income), any debt owed to you by your spouse, or by your or your spouse's child, parent, or sibling, any deposits totalling $5,000 or less in personal savings accounts, any financial interests in or income derived from U.S. Government retirement programs.

If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC) or is jointly held (JT), in the optional column on the far left.

BLOCK B — Value of Asset

at close of reporting year
If you use a valuation method other than fair market value, please specify the method used. If an asset was sold and is included only because it generated income, the value should be "None."

BLOCK C — Type of Income

BLOCK D — Amount of Income

For IRA's and retirement plans that are *not* self-directed, you may write in "NA" for income.

BLOCK E — Transaction

Indicate if asset was purchased (P), sold (S), or exchanged (E) in reporting year

	BLOCK A	B: A None	B: B $1 – $1,000	B: C $1,001 – $15,000	B: D $15,001 – $50,000	B: E $50,001 – $100,000	B: F $100,001 – $250,000	B: G $250,001 – $500,000	B: H $500,001 – $1,000,000	B: I $1,000,001 – $5,000,000	B: J $5,000,001 – $25,000,000	B: K $25,000,001 – $50,000,000	B: L Over $50,000,000	C: DIVIDENDS	C: RENT	C: INTEREST	C: CAPITAL GAINS	C: EXCEPTED TRUST	C: QUALIFIED BLIND TRUST	C: Other Type of Income (Specify. For Example: Partnership Income or Farm Income)	D: I None	D: II $1 – $200	D: III $201 – $1,000	D: IV $1,001 – $2,500	D: V $2,501 – $5,000	D: VI $5,001 – $15,000	D: VII $15,001 – $50,000	D: VIII $50,001 – $100,000	D: IX $100,001 – $1,000,000	D: X $1,000,001 – $5,000,000	D: XI Over $5,000,000	E: P, S, E
SP	SP																														
DC	*Examples*			Indefinite		X							X											X					X		P
JT							X								X					Royalties					X						
	Easy Street Investment Co (Huntsville, AL 1 share)			X												X							X								
	AL State Employees Deferred Income Acct (Montgomery, AL)				X											X							X								
	(Nationwide Fixed Annuity)																														
	(Massachusetts Fixed Annuity)																														

For additional assets and unearned income, use next page.

SCHEDULE V — LIABILITIES

Report liabilities of over $10,000 owed to any one creditor ***at any time*** during the reporting period by you, your spouse, or dependent child. Mark the highest amount owed during the year. **Exclude:** Any mortgage on your personal residence (unless it is rented out), loans secured by automobiles, household furniture, or appliances, and liabilities owed to a spouse, or the child, parent, or sibling of you or your spouse. Report ***revolving charge accounts*** only if the balance at the end of the reporting period exceeded $10,000.

SP, DC, JT	Creditor	Type of Liability	Amount of Liability									
			B $10,001 – $15,000	C $15,001 – $50,000	D $50,001 – $100,000	E $100,001 – $250,000	F $250,001 – $500,000	G $500,001 – $1,000,000	H $1,000,001 – $5,000,000	I $5,000,001 – $25,000,000	J $25,000,001 – $50,000,000	K Over $50,000,000
	Example First Bank of Wilmington, Delaware	Mortgage on 123 Main St., Dover, Del				X						
	SouthTrust Mortgage (Huntsville, AL)	Mortgage on 1212 Locust Ave			X							

SCHEDULE VI — GIFTS

Report the source, a brief description, and the value of all gifts totalling more than $250 received by you, your spouse, or a dependent child from any source during the year.

Exclude: Gifts from relatives, gifts of personal hospitality of an individual, local meals, and gifts to a spouse or dependent child that are totally independent of his or her relationship to you. Gifts with a value of $100 or less need not be added towards the $250 disclosure threshold.

Note: The gift rule (House Rule 51) prohibits gifts except as specifically provided in the rule.

Source	Description	Value
Example Mr. Joseph H. Smith, Anytown, Anystate	Silver Platter (determination on personal friendship received from Committee on Standards)	$270

Use additional sheets if more space is required.

Name	Robert E. Cramer, Jr.	Page 5 of 6

SCHEDULE VII —TRAVEL PAYMENTS AND REIMBURSEMENTS

Identify the source and list travel itinerary, dates, and nature of expenses provided for travel and travel-related expenses totalling more than $250 received by you, your spouse, or a dependent child during the reporting period. Indicate whether a family member accompanied the traveler at the sponsor's expense, and the amount of time, if any, that was not at the sponsor's expense. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor.

Exclude: Travel-related expenses provided by federal, state, and local governments, or by a foreign government required to be separately reported under the Foreign Gifts and Decorations Act (5 U.S.C. § 7342); travel paid for by a Federal political committee; travel provided to a spouse or dependent child that is totally independent of his or her relationship to you.

Source	Date(s)	Point of Departure—Destination—Point of Return	Lodging? (Y/N)	Food? (Y/N)	Was a Family Member Included? (Y/N)	Any time not at sponsor's expense
Examples: Chicago Chamber of Commerce	Mar. 2	Wash , D C —Chicago—Wash , D C	N	N	N	N
Roycroft Corporation	Aug. 6–13	Wash , D.C —Los Angeles—Cleveland	Y	Y	Y	4 Days
National Network of Childrens Advocacy Centers (NNCAC)	Mar 21-22	Wash.,DC - Memphis - DC	Y	Y	N	N
NNCAC	June 14-17	Huntsville - Miami - DC	Y	Y	N	N
NNCAC	Sept 18-19	DC - New York - DC	Y	Y	N	N
NNCAC	Oct 19-20	DC - New York - DC	Y	Y	N	N
NNCAC	Nov 1-3	Huntsville - Chicago - DC	Y	Y	N	N
Childrens Mental Health Alliance	Nov 30-Dec 5	Hvlle - Budapest - Hvlle	Y	Y	N	N
Alabama Farmers Federation	Dec 7-8	Huntsville- Mobile - DC	Y	Y	N	N

This page may be copied if more space is required.

SCHEDULE VIII — POSITIONS

Report all positions, compensated or uncompensated, held during the current calendar year as an officer, director, trustee of an organization, partner, proprietor, representative, employee, or consultant of any corporation, firm, partnership, or other business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States.

Exclude: Positions held in any religious, social, fraternal, or political entities, positions solely of an honorary nature, and positions listed on Schedule I

Position	Name of Organization
Board Member (unpaid)	National Center for Missing & Exploited Children, Arlington, VA

SCHEDULE IX — AGREEMENTS

Identify the date, parties to, and general terms of any agreement or arrangement with respect to: future employment; a leave of absence during the period of government service; continuation or deferral of payments by a former or current employer other than the U.S. Government, or continuing participation in an employee welfare or benefit plan maintained by a former employer.

Date	Parties To	Terms of Agreement

GPO 1998 46-260 (mac)

Use additional sheets if more space is required.

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COMMITTEE ON
APPROPRIATIONS

E-MAIL: budmail@mail.house.gov
WEB PAGE: http://www.house.gov/cramer/welcome.html

BUD CRAMER
5TH DISTRICT OF ALABAMA
U.S. HOUSE OF REPRESENTATIVES
June 4, 1998

√ (2)
MC

Ms. Robin Carle
Clerk of the House
H-154, the Capitol
Washington, DC 20515

Dear Ms. Carle:

I am writing to respectfully request that the enclosed Schedule III of my annual financial disclosure statement be substituted for the one that was submitted on May 13, 1998 to the Legislative Resource Center and your office. An error was discovered in the original schedule and my office was advised by the Committee on Standards to submit the enclosed substitute.

I appreciate your attention my request. Should you have any questions pertaining to this matter, please contact Samantha Smith of my office at 225-4801.

Sincerely,

Bud

Bud Cramer
Member of Congress

BC:ss

2416 RAYBURN BUILDING
WASHINGTON, D.C. 20515-0190
(202) 225-4801

403 FRANKLIN STREET
HUNTSVILLE, AL 35801
(205) 551-0190

1301-C JOHN R. STREET
MUSCLE SHOALS, AL 35661
(205) 381-3450

MORGAN CO. COURTHOUSE
BOX 668
DECATUR, AL 35602
(205) 355-9400

THIS MAILING WAS PREPARED, PUBLISHED, AND MAILED AT TAXPAYER EXPENSE
Printed on Recycled Paper

SCHEDULE III — ASSETS AND "UNEARNED" INCOME

Name Robert E. Cramer, Jr. Page 3 of 6

BLOCK A — Asset and/or Income Source

Identify (a) each asset held for investment or production of income with a fair market value exceeding $1,000 at the end of the reporting year, and (b) any other asset or source of income which generated more than $200 in "unearned" income during the year. For rental property or land, provide an address. Provide full names of any mutual funds. For an IRA or retirement plan that is *self-directed*, list the underlying assets worth more than $1,000. For an IRA or retirement plan that is not selfdirected, name the institution holding the account

Exclude: Your personal residence(s) (unless there is rental income), any debt owed to you by your spouse, or by your or your spouse's child, parent, or sibling, any deposits totalling $5,000 or less in personal savings accounts, any financial interests in or income derived from U.S. Government retirement programs.

If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC) or is jointly held (JT), in the optional column on the far left

BLOCK B — Value of Asset at close of reporting year. If you use a valuation method other than fair market value, please specify the method used. If an asset was sold and is included only because it generated income, the value should be "None."

BLOCK C — Type of Income

BLOCK D — Amount of Income For IRA's and retirement plans that are *not* self-directed, you may write in "NA" for income

BLOCK E — Transaction Indicate if asset was purchased (P), sold (S), or exchanged (E) in reporting year

	BLOCK A	BLOCK B: A None	B $1 – $1,000	C $1,001 – $15,000	D $15,001 – $50,000	E $50,001 – $100,000	F $100,001 – $250,000	G $250,001 – $500,000	H $500,001 – $1,000,000	I $1,000,001 – $5,000,000	J $5,000,001 – $25,000,000	K $25,000,001 – $50,000,000	L Over $50,000,000	BLOCK C: DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Type of Income (Specify. For Example, Partnership Income or Farm Income)	BLOCK D: I None	II $1 – $200	III $201 – $1,000	IV $1,001 – $2,500	V $2,501 – $5,000	VI $5,001 – $15,000	VII $15,001 – $50,000	VIII $50,001 – $100,000	IX $100,001 – $1,000,000	X $1,000,001 – $5,000,000	XI Over $5,000,000	BLOCK E
SP, DC, JT	*Examples*		Indefinite			X							X			X				Royalties				X		X			X			P, S, E P
SP	Mega Corp Stock																															
	Simon & Schuster						X																									
	1st Bank of Paducah, KY accounts																															
	Easy Street Investment Co. (Huntsville, AL 1 share)			X													X							X								
	AL State Employees Deferred Income Acct (Montgomery, AL) invested in: (Nationwide Fixed Annuity) (Massachusetts Fixed Annuity)				X												X							X								
	1212 Locust Ave, Huntsville, AL						X								X									X								

For additional assets and unearned income, use next page.

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1996

FORM A
For use by Members, officers, and employees

RECEIVED
96 MAY 15 PM 3:45

Philip Miller Crane
(Full Name)

233 Cannon House Office Building
(Mailing Address)

Washington, DC 20515

Daytime Telephone: (202) 225-3711

HAND DELIVERED
MC
(Office Use Only)

Filer Status	[X]	Member of the U.S. House of Representatives	State Illinois District 8th	[ ]	Officer or Employee	Employing Office
Report Type	[X]	Annual (May 15)	[ ] Amendment	[ ]	Termination	Termination Date

A *$200 penalty* shall be assessed against anyone who files more than 30 days late.

PRELIMINARY INFORMATION — ANSWER EACH OF THESE QUESTIONS

I. Did you or your spouse have "earned" income (e.g., salaries or fees) of $200 or more from any source in the reporting period? **If yes, complete and attach Schedule I.** — Yes [ ] No [X]

II. Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? **If yes, complete and attach Schedule II.** — Yes [X] No [ ]

III. Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? **If yes, complete and attach Schedule III.** — Yes [X] No [ ]

IV. Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset worth more than $1,000 in the reporting period? **If yes, complete and attach Schedule IV.** — Yes [ ] No [X]

V. Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? **If yes, complete and attach Schedule V.** — Yes [ ] No [X]

VI. Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $250 and not otherwise exempt)? **If yes, complete and attach Schedule VI.** — Yes [ ] No [X]

VII. Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $250 from one source)? **If yes, complete and attach Schedule VII.** — Yes [X] No [ ]

VIII. Did you hold any reportable positions on or before the date of filing in the current calendar year? **If yes, complete and attach Schedule VIII.** — Yes [X] No [ ]

IX. Did you have any reportable agreement or arrangement with an outside entity? **If yes, complete and attach Schedule IX.** — Yes [ ] No [X]

Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION — ANSWER EACH OF THESE QUESTIONS

TRUSTS—Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child? (See Instructions, pages 10–11.) — Yes [ ] No [X]

EXEMPTION—Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption? (See Instructions, page 11.) — Yes [ ] No [X]

CERTIFICATION — THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended. The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct or its designee. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil penalties and criminal sanctions (*See* 5 U.S.C. app. 4, §104 and 18 U.S.C. §1001).

SIGNATURE OF REPORTING INDIVIDUAL: Philip M. Crane — DATE (Month/Day/Year): 5/14/98

777

SCHEDULE II — PAYMENTS IN LIEU OF HONORARIA MADE TO CHARITY

List the source, activity (i.e., speech, appearance, or article), date, and amount of any payment made by the sponsor of an event to a charitable organization in lieu of an honorarium. A separate confidential list of charities receiving such payments must be filed directly with the Committee on Standards of Official Conduct. An envelope for transmitting the list is included in each Member's filing package.

Source	Activity	Date	Amount
Examples Association of American Associations, Wash., D.C.	Speech	Feb. 2, 1997	$2,000
XYZ Magazine	Article	Aug. 13, 1997	$500
Tax Foundation	Speech	Jan. 10, 1997	$1500
The Association for Manufacturing Technology	Speech	June 25, 1997	$1000

This page may be copied if more space is required.

SCHEDULE III — ASSETS AND "UNEARNED" INCOME

Name: Philip Miller Crane | Page 3 of 6

BLOCK A — Asset and/or Income Source

Identify (a) each asset held for investment or production of income with a fair market value exceeding $1,000 at the end of the reporting year, and (b) any other asset or source of income which generated more than $200 in "unearned" income during the year. For rental property or land, provide an address. Provide full names of any mutual funds. For an IRA or retirement plan that is *self-directed*, list the underlying assets worth more than $1,000. For an IRA or retirement plan that is not self-directed, name the institution holding the account.

Exclude: Your personal residence(s) (unless there is rental income), any debt owed to you by your spouse, or by your or your spouse's child, parent or sibling, any deposits totalling $5,000 or less in personal savings accounts, any financial interests in or income derived from U.S. Government retirement programs.

If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC) or is jointly held (JT) in the optional column on the far left.

BLOCK B — Value of Asset

at close of reporting year. If you use a valuation method other than fair market value, please specify the method used. If an asset was sold and is included only because it generated income, the value should be "None."

BLOCK C — Type of Income

BLOCK D — Amount of Income

For IRA's and retirement plans that are *not* self-directed, you may write in "NA" for income.

BLOCK E — Transaction

Indicate if asset was purchased (P), sold (S), or exchanged (E) in reporting year.

	BLOCK A	BLOCK B												BLOCK C							BLOCK D										BLOCK E
		A None	B $1 – $1,000	C $1,001 – $15,000	$15,001 – $50,000	E $50,001 – $100,000	F $100,001 – $250,000	G $250,001 – $500,000	H $500,001 – $1,000,000	I $1,000,001 – $5,000,000	J $5,000,001 – $25,000,000	K $25,000,001 – $50,000,000	L Over $50,000,000	DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Type of Income (Specify. For Example: Partnership Income or Farm Income)	I None	II $1 – $200	III $201 – $1,000	IV $1,001 – $2,500	V $2,501 – $5,000	VI $5,001 – $15,000	VII $15,001 – $50,000	VIII $50,001 – $100,000	IX $100,001 – $1,000,000	X $1,000,001 – $5,000,000	XI Over $5,000,000	P, S, E
SP DC JT	*Examples* SP Mega Corp. Stock Simon & Schuster 1st Bank of Paducah, KY accounts		Indefinite			X	X							X		X				Royalties				X		X			X		P
	Congressional Credit Union					X										X								X							
SP	First Union Bank Account							X								X									X						
	TIAA/CREF (Retirement)				X											X							X								
	American Capital IRA				X									X									X								
	Vanguard SEP-IRA							X						X												X					
	continued																X									X					

For additional assets and unearned income, use next page.

SCHEDULE III — ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Name Philip Miller Crane | Page 4 of 6

SP DC JT	BLOCK A Asset and/or Income Source	BLOCK B Year-End Value of Asset												BLOCK C Type of Income								BLOCK D Amount of Income											BLOCK E Transaction		
		A None	B $1 – $1,000	C $1,001 – $15,000	D $15,001 – $50,000	E $50,001 – $100,000	F $100,001 – $250,000	G $250,001 – $500,000	H $500,001 – $1,000,000	I $1,000,001 – $5,000,000	J $5,000,001 – $25,000,000	K $25,000,001 – $50,000,000	L Over $50,000,000	DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Type of Income (Specify)		I None	II $1 – $200	III $201 – $1,000	IV $1,001 – $2,500	V $2,501 – $5,000	VI $5,001 – $15,000	VII $15,001 – $50,000	VIII $50,001 – $100,000	IX $100,001 – $1,000,000	X $1,000,001 – $5,000,000	XI Over $5,000,000		P S E
	Coin Collection					X																X												
	New England Fund	X												X									X											
	Putnam Income Fund						X							X													X							
	Putnam Insured Fund						X							X													X							
	Nuveen Quality Fund					X								X												X								
	Nuveen Municipal Fund				X									X												X								
	MFS Municipal Trust					X								X												X								
	Fountain County, IN, Farm				X															Farm Income							X							
	Bay Oaks Development Corp -interest in 400 acres of development property in McHenry, IL							X														X												
	Bay View Development Corp -interest in 130 acres of development property in McHenry, IL						X															X												
	Hartford Annuity					X														Annuity							X							

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SCHEDULE VII —TRAVEL PAYMENTS AND REIMBURSEMENTS

Identify the source and list travel itinerary, dates, and nature of expenses provided for travel and travel-related expenses totalling more than $250 received by you, your spouse, or a dependent child during the reporting period. Indicate whether a family member accompanied the traveler at the sponsor's expense, and the amount of time, if any, that was not at the sponsor's expense. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor.

Exclude: Travel-related expenses provided by federal, state, and local governments, or by a foreign government required to be separately reported under the Foreign Gifts and Decorations Act (5 U.S.C. § 7342); travel paid for by a Federal political committee; travel provided to a spouse or dependent child that is totally independent of his or her relationship to you.

Source		Date(s)	Point of Departure—Destination—Point of Return	Lodging? (Y/N)	Food? (Y/N)	Was a Family Member Included? (Y/N)	Any time not at sponsor's expense
Examples	Chicago Chamber of Commerce	Mar. 2	Wash., D.C.—Chicago—Wash., D.C.	N	N	N	N
	Roycroft Corporation	Aug. 6–13	Wash., D.C.—Los Angeles—Cleveland	Y	Y	Y	4 Days
Tax Foundation		Jan 10-13	DC-Miami-DC	Y	Y	Y	N
Assoc. of American Railroads		April 4-7	DC-West Palm Beach-DC	Y	Y	Y	N
Public Forum Institute		May 27-28	Chicago-Minneapolis-Chicago	Y	Y	N	N
Caribbean Latin American Action		Dec 7-11	DC-Miami-DC	Y	Y	Y	N

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SCHEDULE VIII — POSITIONS

Report all positions, compensated or uncompensated, held during the current calendar year as an officer, director, trustee of an organization, partner, proprietor, representative, employee, or consultant of any corporation, firm, partnership, or other business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States.

Exclude: Positions held in any religious, social, fraternal, or political entities; positions solely of an honorary nature; and positions listed on Schedule I

Position	Name of Organization
Board of Advisors	John M. Ashbrook Center for Public Affairs, Ohio
Board of Trustees	Hillsdale College, Michigan
Trustee	Intercollegiate Studies Institute, Delaware
Nat'l Steering Committee	Friends of the Milton and Rose D. Friedman Foundation, Indiana
Board of Trustees	Association of American Chambers of Commerce in Latin America, Washington, D.C.

SCHEDULE IX — AGREEMENTS

Identify the date, parties to, and general terms of any agreement or arrangement with respect to: future employment; a leave of absence during the period of government service; continuation or deferral of payments by a former or current employer other than the U.S. Government; or continuing participation in an employee welfare or benefit plan maintained by a former employer

Date	Parties To	Terms of Agreement

GPO 1998 46-260 (mac)

Use additional sheets if more space is required.

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1997

Form A
For use by Members, officers, and employees

98 MAY -7 PM 12:31

OFFICE OF THE CLERK
U.S. HOUSE OF REPRESENTATIVES

HAND DELIVERED

(6)

Michael D Crapo
(Full Name)

437 Cannon House Office Building
(Mailing Address)

Washington DC 20515

Daytime Telephone
202-225-5531

MC
(Office Use Only)

Filer Status
[X] Member of the U S House of Representatives — State ID, District 02
[ ] Officer or Employee — Employing Office

Report Type
[X] Annual (May 15)
[ ] Amendment
[ ] Termination — Termination Date

A $200 penalty shall be assessed against anyone who files more than 30 days late.

PRELIMINARY INFORMATION -- ANSWER EACH OF THESE QUESTIONS

I Did you or your spouse have "earned" income (e g , salaries or fees) of $200 or more from any source in the reporting period?
If yes, complete and attach Schedule I. Yes [ ] No [X]

II Did any individual or organization make a donation to charity in lieu of paying you for a speech, apppearance, or article in the reporting period?
If yes, complete and attach Schedule II. Yes [X] No [ ]

III Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period?
If yes, complete and attach Schedule III. Yes [X] No [ ]

IV Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset worth more than $1,000 in the reporting period?
If yes, complete and attach Schedule IV. Yes [ ] No [X]

V Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period?
If yes, complete and attach Schedule V. Yes [X] No [ ]

VI Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i e , aggregating more than $250 and not otherwise exempt)?
If yes, complete and attach Schedule VI. Yes [ ] No [X]

VII Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $250 from one source)?
If yes, complete and attach Schedule VII. Yes [X] No [ ]

VIII Did you hold any reportable positions on or before the date of filing in the current calendar year?
If yes, complete and attach Schedule VIII. Yes [ ] No [X]

IX Did you have any reportable agreement or arrangement with an outside entity?
If yes, complete and attach Schedule IX. Yes [ ] No [X]

Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION -- ANSWER EACH OF THESE QUESTIONS

TRUSTS Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child? (See Instructions, pages 10-11) Yes [X] No [ ]

EXEMPTION Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption? (See Instructions, page 11) Yes [ ] No [X]

CERTIFICATION -- THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct or its designee Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil penalties and criminal sanctions (See 5 U S C app 4, 104 and 18 U S C 1001)

SIGNATURE OF REPORTING INDIVIDUAL: M. Crapo

DATE (Month/Day/Year): 5-6-98

SCHEDULE II -- PAYMENTS IN LIEU OF HONORARIA MADE TO CHARITY

List the source, activity (i e , speech, appearance, or article), date, and amount of any payment made by the sponsor of an event to a charitable organization in lieu of an honorarium A separate confidential list of charities receiving such payments must be filed directly with the Committe on Standards of Official Conduct An envelope for transmitting the list is included in each Member's filing package For further information, see Instructions, pages 13-14

	Source	Activity	Date	Amount
Examples	Association of American Associations, Wash., D C	Speech	Feb 2, 1994	$2 000
	XYZ Magazine	Article	Aug 13, 1994	$500
	Kmart Family Foundation	Race	9/10/97	$500 0

SCHEDULE III -- ASSETS AND "UNEARNED" INCOME

BLOCK A **Asset and/or Income Source** Identify (a) each asset held for investment or production of income with a fair market value exceeding $1,000 at the end of the reporting year, and (b) any other asset or source of income which generated more than $200 in "unearned" income during the year. For rental property or land, provide an address. Provide full names of any mutual funds. For an IRA or retirement plan that is *self-directed*, list the underlying assets worth more than $1,000. For an IRA or retirement plan that is *not* self-directed, name the institution holding the account. **Exclude:** Your personal residence(s) (unless there is rental income); any debt owed to you by your spouse, or by your or your spouse's child, parent, or sibling; any deposits totalling $5,000 or less in personal savings accounts; any financial interests in or income derived from U.S. Government retirement programs. If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC) or is jointly held (JT), in the optional column on the far left. For further information, see Instructions, pages 14-20	BLOCK B **Value of Asset** at close of reporting year If you use a valuation method other than fair market value, please specify the method used. If an asset was sold and is included only because it generated income, the value should be "None."	BLOCK C **Type of Income** If other than one of the listed categories, specify the type of income by writing a brief description in this block.	BLOCK D **Amount of Income** For IRA's and retirement plans that are *not* self-directed, you may write in "NA" for income	BLOCK E **Transaction** Indicate if asset was purchased(P), sold(S), or exchanged(E) in reporting year
SP DC *Examples* JT — SP — Mega Corp. Stock 123 Main St., Dover, Del 1st Bank of Paducah, KY accounts	$15,001 - $50,000 $250,001 - $500,000 $50,001 - $100,000	Dividends Rent Interest	$201 - $1,000 $1,001 - $2,500 $5,001 - $15,000	P
JT — 321 2nd St. SE Washington, DC	$250,001 - $500,000	Rent	$15,001 - $50,000	
JT — Undivided minority interest in 359 acres ranch land Fremont, ID	$1,001 - $15,000	Rent	$1 - $200	
JT — Medical and Professional Credit Union Accounts	$50,001 - $100,000	Interest	$1,001 - $2,500	
JT — Key Bank of ID checking account	None	Interest	$1 - $200	
JT — Idaho State Retirement Plan	$1,001 - $15,000	Not Applicable	None	NA
JT — Cong. Fed. Credit Union Accts	$1,001 - $15,000	Interest	$1 - $200	
JT — Merrill Lynch CMA Money Fund	$1,001 - $15,000	Dividends	$201 - $1,000	

SCHEDULE III -- ASSETS AND "UNEARNED" INCOME

JT	CIPSCO Inc Illinois Common Stock	$1,001 - $15,000	Dividends	$201 - $1,000	
JT	Merrill Lynch World Income	$1,001 - $15,000	Dividends	$1 - $200	
JT	Idaho Falls, ID Electric Bonds	$1,001 - $15,000	Interest	$201 - $1,000	
JT	Unit JMB Hawaii, Limited Partnership	$1,001 - $15,000	Interest	$1 - $200	
JT	IRA TIGR PRINE Series 23, 0%	$1,001 - $15,000	Interest	$1 - $200	
JT	IRA Merrill Lynch Retirement Reserve Money Fund	$1,001 - $15,000	Dividends	$201 - $1,000	
JT	IRA Merrill Lynch World Income Fund for Tomorrow, Class D	$1,001 - $15,000	Dividends	$201 - $1,000	
JT	IRA Merrill Lynch World Income Fund for Tomorrow, Class A	$1,001 - $15,000	Dividends	$1 - $200	
JT	IRA Merrill Lynch Income Realty Partnership VI-LP-86	$1 - $1,000	Interest	$1 - $200	
DC	Merrill Lynch Basic Value Fund Class A	$1,001 - $15,000	Dividends	$201 - $1,000	
DC	Merrill Lynch Fund for Tomorrow Class D	$1,001 - $15,000	Dividends	$1 - $200	
JT	PAB Oil & Mining, INC	$1 - $1,000	Dividends	$1 - $200	
JT	Frontier Energy Corp	$1 - $1,000	Dividends	$1 - $200	
JT	Investment Development Corp	$1 - $1,000	Dividends	$1 - $200	
JT	KEOUGH Branch-Cabell Account	$100,001 - $250,000	UNKNOWN	None	

SCHEDULE V -- LIABILITIES

Report liabilities of over $10,000 owed to any one creditor ***at any time*** during the reporting period by you, your spouse, or dependent child. Mark the highest amount owed during the year.
Exclude: Any mortgage on your personal residence (unless it is rented out), loans secured by automobiles, household furniture, or appliances, and liabilities owed to a spouse, or the child, parent, or sibling of you or your spouse. Report ***revolving charge accounts*** only if the balance at the end of the reporting period exceeded $10,000. For further information, see Instructions, pages 21-22.

SP,DC,JT	Creditor	Type of Liability	Amount of Liability
	Example First Bank of Wilmington, Delaware	Mortgage on 123 Main St., Dover, Del	$100,001 - $250,000
JT	Prudential Home Mortgage	Mortgage on 321 2nd St SE Washington, DC	$250,001 - $500,000

SCHEDULE VII -- TRAVEL PAYMENTS AND REIMBURSEMENTS

Identify the source and list travel itinerary, dates, and nature of expenses provided for travel and travel-related expenses totalling more than $250 received by you, your spouse, or a dependent child during the reporting period. Indicate whether a family member accompanied the traveler at the sponsor's expense, and the amount of time, if any, that was not at the sponsor's expense. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor.
Exclude: Travel-related expenses provided by federal, state and local governments, or by a foreign government required to be separately reported under the Foreign Gifts and Decorations Act (5 U.S.C. 7342); travel paid for by a Federal political committee; travel provided to a spouse or dependent child that is totally independent of his or her relationship to you. For further information, see Instructions, pages 24-26.

Source	Date(s)	Point of Departure--Destination--Point of Return	Lodging? (Y/N)	Food? (Y/N)	Was a Family Member Included? (Y/N)	Any time not at sponsor's expense
Examples: Chicago Chamber of Commerce	Mar 2	Wash., D.C.-Chicago-Wash., D.C.	N	N	N	N
Mega Corporation	Aug 6-13	Wash., D.C.-Los Angeles-Cleveland	Y	Y	Y	4 Days
ASARCO, INC	1/11/97 to 1/14/97	Wash., DC- New York, NY-Boise ID	Y	Y	N	No
Family Farm Alliance	2/23/97 to 2/24/97	Idaho Falls, ID-Las Vegas, NV-Wash, DC	Y	Y	Y	No
Western States Coalition	8/27/97 to 8/30/97	Idaho Falls, ID to Salt Lake City to West Yellowstone to Salt Lake City to Idaho Falls	Y	Y	N	No
The Aspen Institute	3/7/97 to 3/9/97	Wash., DC to Hershey, PA to Wash DC	Y	Y	N	No

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1997

FORM A

For use by Members, officers, and employees

98 MAY 15 PM 2:31

BARBARA LINN CUBIN
(Full Name)

1600 N. OAK # 1205
(Mailing Address)

ARLINGTON, VA 22209

202-225-2311
Daytime Telephone

HAND DELIVERED (6)
(Office Use Only)

Filer Status

[X] Member of the U.S. House of Representatives — State WY District AT LARGE

[ ] Officer or Employee — Employing Office

Report Type

[X] Annual (May 15)

[ ] Amendment

[ ] Termination — Termination Date

A *$200 penalty* shall be assessed against anyone who files more than 30 days late.

PRELIMINARY INFORMATION — ANSWER EACH OF THESE QUESTIONS

I. Did you or your spouse have "earned" income (e.g., salaries or fees) of $200 or more from any source in the reporting period?
If yes, complete and attach Schedule I. Yes [X] No [ ]

II. Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period?
If yes, complete and attach Schedule II. Yes [ ] No [X]

III. Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period?
If yes, complete and attach Schedule III. Yes [X] No [ ]

IV. Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset worth more than $1,000 in the reporting period?
If yes, complete and attach Schedule IV. Yes [X] No [ ]

V. Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period?
If yes, complete and attach Schedule V. Yes [ ] No [X]

VI. Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $250 and not otherwise exempt)?
If yes, complete and attach Schedule VI. Yes [ ] No [X]

VII. Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $250 from one source)?
If yes, complete and attach Schedule VII. Yes [ ] No [X]

VIII. Did you hold any reportable positions on or before the date of filing in the current calendar year?
If yes, complete and attach Schedule VIII. Yes [ ] No [X]

IX. Did you have any reportable agreement or arrangement with an outside entity?
If yes, complete and attach Schedule IX. Yes [ ] No [X]

Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION — ANSWER EACH OF THESE QUESTIONS

TRUSTS—Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child? Yes [ ] No [X]

EXEMPTION—Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption? Yes [ ] No [X]

CERTIFICATION — THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended. The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct or its designee. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil penalties and criminal sanctions (*See* 5 U.S.C. app. 4, §104 and 18 U.S.C. §1001)

SIGNATURE OF REPORTING INDIVIDUAL: Barbara Cubin

DATE (Month/Day/Year): 5-13-98

Name BARBARA CUBIN	Page 2 of 6

SCHEDULE I — EARNED INCOME

List the source, type, and amount of earned income from any source (other than the filer's current employment by the U.S. Government) totalling $200 or more during the preceding calendar year. For a spouse, list the source and amount of any honoraria; list only the source for other spouse earned income exceeding $1,000.

	Source	Type	Amount
Examples	Keene State	Approved Teaching Fee	$6,000
	State of Maryland	Legislative Pension	$9,000
	Civil War Roundtable (Oct 2nd)	Spouse Speech	$1,000
	Ontario County Board of Education	Spouse Salary	NA
	FRED W. CUBIN, M.D.	SPOUSE SALARY	N/A

For payments to charity in lieu of honoraria, use Schedule II.

SCHEDULE III — ASSETS AND "UNEARNED" INCOME

Name [illegible] | Page 3 of 6

BLOCK A — Asset and/or Income Source

Identify (a) each asset held for investment or production of income with a fair market value exceeding $1,000 at the end of the reporting year, and (b) any other asset or source of income which generated more than $200 in "unearned" income during the year. For rental property or land, provide an address. Provide full names of any mutual funds. For an IRA or retirement plan that is *self-directed*, list the underlying assets worth more than $1,000. For an IRA or retirement plan that is not selfdirected, name the institution holding the account.

Exclude: Your personal residence(s) (unless there is rental income), any debt owed to you by your spouse, or by your or your spouse's child, parent, or sibling, any deposits totalling $5,000 or less in personal savings accounts, any financial interests in or income derived from U.S. Government retirement programs.

If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC) or is jointly held (JT), in the optional column on the far left.

BLOCK B — Value of Asset

at close of reporting year. If you use a valuation method other than fair market value, please specify the method used. If an asset was sold and is included only because it generated income, the value should be "None."

BLOCK C — Type of Income

BLOCK D — Amount of Income

For IRA's and retirement plans that are *not* self-directed, you may write in "NA" for income.

BLOCK E — Transaction

Indicate if asset was purchased (P), sold (S), or exchanged (E) in reporting year.

	BLOCK A	BLOCK B												BLOCK C						BLOCK D										BLOCK E
		A None	B $1 – $1,000	C $1,001 – $15,000	E $15,001 – $50,000	F $50,001 – $100,000	G $100,001 – $250,000	H $250,001 – $500,000	I $500,001 – $1,000,000	J $1,000,001 – $5,000,000	K $5,000,001 – $25,000,000	L $25,000,001 – $50,000,000	Over $50,000,000	DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Type of Income (Specify. For Example: Partnership Income or Farm Income)	I None	II $1 – $200	III $201 – $1,000	IV $1,001 – $2,500	V $2,501 – $5,000	VI $5,001 – $15,000	VII $15,001 – $50,000	VIII $50,001 – $100,000	IX $100,001 – $1,000,000	X $1,000,001 – $5,000,000	Over $5,000,000	S. P. E.
SP. DC. JT	*Examples*		Indefinite			X	X							X		X				Royalties				X		X				P
IRA	SMITH BARNEY MONEY FUND	X														X					X									
"	GLAXO			X										X							X									
"	INV. CO. of AMERICA			X										X							X									
"	LAGACY ANNUITY				X									X			X					X								
"	SP's GROWTH FUND			X										X			X					X								

For additional assets and unearned income, use next page.

SCHEDULE III — ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Name [illegible] COPPIN | Page 4 of 6

SP. DC. JT	BLOCK A Asset and/or Income Source	BLOCK B Year-End Value of Asset: A None	B $1 – $1,000	C $1,001 – $15,000	D $15,001 – $50,000	E $50,001 – $100,000	F $100,001 – $250,000	G $250,001 – $500,000	H $500,001 – $1,000,000	I $1,000,001 – $5,000,000	J $5,000,001 – $25,000,000	K $25,000,001 – $50,000,000	L Over $50,000,000	BLOCK C Type of Income: DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Type of Income (Specify)	BLOCK D Amount of Income: I None	II $1 – $200	III $201 – $1,000	IV $1,001 – $2,500	V $2,501 – $5,000	VI $5,001 – $15,000	VII $15,001 – $50,000	VIII $50,001 – $100,000	IX $100,001 – $1,000,000	X $1,000,001 – $5,000,000	XI Over $5,000,000	BLOCK E Transaction: P. S. E
IRA	SB TOTAL RETURN FUND			X										X			X					X										
"	CONCERT FUND			X										X			X				X											
"	US OFFICE PRODUCTS			X																	X											
"	[illegible]			X										X							X											
"	[illegible]		X														X				X											
"	IDEN TIX			X													X				X											
"	LAGUNE INT'L		X											X							X											
"	INCOME FUND OF AM				X									X									X									
	CASPER MTN CONC					X															X											
	GARFIELD PERK DAIC						X														X											
	STATE ST MUTUAL FUND				X									X									X									
	NORWEST BANK SAVINGS			X												X							X									
	ACCT																															
	THRIFT SAVINGS FUND					X								X							X											
	US HOUSE FED CREDIT UN.			X												X						X										

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SCHEDULE IV — TRANSACTIONS

Name BARBARA (MURRAY) | Page 5 of 6

Report any purchase, sale, or exchange by you, your spouse, or dependent child during the reporting year of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child, or the purchase or sale of your personal residence, unless it is rented out.

SP, DC, JT	Asset	Type of Transaction: PURCHASE	SALE	EXCHANGE	Date (MO/DAY/YR)	Amount of Transaction: B $1,001–$15,000	C $15,001–$50,000	D $50,001–$100,000	E $100,001–$250,000	F $250,001–$500,000	G $500,001–$1,000,000	H $1,000,001–$5,000,000	I $5,000,001–$25,000,000	J $25,000,001–$50,000,000	K Over $50,000,000
SP	*Example:* Mega Corporation Common Stock	X			10–12–97		X								
	STAPLES		X		8-7-97	X									
	US OFFICE PRODUCTS	X			9-5-97	X									

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SCHEDULE VII —TRAVEL PAYMENTS AND REIMBURSEMENTS

Identify the source and list travel itinerary, dates, and nature of expenses provided for travel and travel-related expenses totalling more than $250 received by you, your spouse, or a dependent child during the reporting period. Indicate whether a family member accompanied the traveler at the sponsor's expense, and the amount of time, if any, that was not at the sponsor's expense. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor.

Exclude: Travel-related expenses provided by federal, state, and local governments, or by a foreign government required to be separately reported under the Foreign Gifts and Decorations Act (5 U.S.C. § 7342); travel paid for by a Federal political committee; travel provided to a spouse or dependent child that is totally independent of his or her relationship to you.

	Source	Date(s)	Point of Departure—Destination—Point of Return	Lodging? (Y/N)	Food? (Y/N)	Was a Family Member Included? (Y/N)	Any time not at sponsor's expense
Examples	Chicago Chamber of Commerce	Mar. 2	Wash., D.C.—Chicago—Wash., D.C.	N	N	N	N
	Roycroft Corporation	Aug. 6–13	Wash., D.C.—Los Angeles—Cleveland	Y	Y	Y	4 Days
	Israel Amer-Israeli Edu. Found.	1/10–17	Wash DC — Israel — Wash DC	Y	Y	Y	N

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UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1997

FORM A
For use by Members, officers, and employees

98 MAY 19 AM 9 15

ELIJAH E. CUMMINGS (Full Name)
2014 MADISON AVENUE (Mailing Address)
BALTIMORE, MD 21217
(410) 367-1900 (Daytime Telephone)
(202) 225-4741

MAY 15 1998 (9)
MC (Office Use Only)

Filer Status	☒ Member of the U.S. House of Representatives	State MD District 7	☐ Officer or Employee	Employing Office		**A *$200 penalty* shall be assessed against anyone who files more than 30 days late.**
Report Type	☒ Annual (May 15)	☐ Amendment		☐ Termination	Termination Date	

PRELIMINARY INFORMATION — ANSWER EACH OF THESE QUESTIONS

I Did you or your spouse have "earned" income (e.g., salaries or fees) of $200 or more from any source in the reporting period? **If yes, complete and attach Schedule I.** — Yes ☒ No ☐

II Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? **If yes, complete and attach Schedule II.** — Yes ☒ No ☐

III Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? **If yes, complete and attach Schedule III.** — Yes ☒ No ☐

IV Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset worth more than $1,000 in the reporting period? **If yes, complete and attach Schedule IV.** — Yes ☒ No ☐

V Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? **If yes, complete and attach Schedule V.** — Yes ☒ No ☐

VI Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $250 and not otherwise exempt)? **If yes, complete and attach Schedule VI.** — Yes ☒ No ☐

VII Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $250 from one source)? **If yes, complete and attach Schedule VII.** — Yes ☒ No ☐

VIII Did you hold any reportable positions on or before the date of filing in the current calendar year? **If yes, complete and attach Schedule VIII.** — Yes ☒ No ☐

IX Did you have any reportable agreement or arrangement with an outside entity? **If yes, complete and attach Schedule IX.** — Yes ☐ No ☒

Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION — ANSWER EACH OF THESE QUESTIONS

TRUSTS— Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child? — Yes ☐ No ☒

EXEMPTION— Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption? — Yes ☐ No ☒

CERTIFICATION — THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended. The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct or its designee. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil penalties and criminal sanctions (*See* 5 U.S.C. app. 4, §104 and 18 U.S.C. §1001).

SIGNATURE OF REPORTING INDIVIDUAL √ [signature]

DATE (Month/Day/Year) 5/15/98

SCHEDULE I — EARNED INCOME

List the source, type, and amount of earned income from any source (other than the filer's current employment by the U.S. Government) totalling $200 or more during the preceding calendar year. For a spouse, list the source and amount of any honoraria; list only the source for other spouse earned income exceeding $1,000.

Source	Type	Amount
Examples Keene State	Approved Teaching Fee	$6,000
State of Maryland	Legislative Pension	$9,000
Civil War Roundtable (Oct 2nd)	Spouse Speech	$1,000
Ontario County Board of Education	Spouse Salary	NA
BALTIMORE COUNTY, MD, SCHOOLS	SPOUSE SALARY	$55,000
ELIJAH E. CUMMINGS, P.A. [EARNED PRE-4/96] (NOTE 1)	DISTRIBUTION	$4,780 (NOTE 1)

NOTE 1: During 1997, ELIJAH E. CUMMINGS, P.A., RECEIVED AND DISTRIBUTED TO ELIJAH E. CUMMINGS, INDIVIDUALLY, $4,780 IN legal fees for legal work performed prior to his election to Congress (4/96) but not paid until 1997. See, also, NOTE 1 ON 5-15-97 Report.

For payments to charity in lieu of honoraria, use Schedule II.

SCHEDULE II — PAYMENTS IN LIEU OF HONORARIA MADE TO CHARITY

List the source, activity (i.e., speech, appearance, or article), date, and amount of any payment made by the sponsor of an event to a charitable organization in lieu of an honorarium. A separate confidential list of charities receiving such payments must be filed directly with the Committee on Standards of Official Conduct. An envelope for transmitting the list is included in each Member's filing package.

Source	Activity	Date	Amount
Examples Association of American Associations, Wash., D.C. / XYZ Magazine	Speech / Article	Feb. 2, 1997 / Aug. 13, 1997	$2,000 / $500
LEWIN METHODIST CHURCH, BALT, MD	SPEECH	1/31/97	$ 200
MD. STATE TREASURER RICHARD DIXON	SPEECH	1/97	$ 100
ZION BAPTIST CHURCH, BALT., MD	SPEECH	1/97	$ 200
BETHEL AME CHURCH, BALT., MD	SPEECH	3/97	$ 500
HOWARD UNIVERSITY, WASH., D.C.	SPEECH	11/22/97	$ 300

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Name ELIJAH E. CUMMINGS | Page 4 of 9

SCHEDULE III — ASSETS AND "UNEARNED" INCOME

BLOCK A — Asset and/or Income Source

Identify (a) each asset held for investment or production of income with a fair market value exceeding $1,000 at the end of the reporting year, and (b) any other asset or source of income which generated more than $200 in "unearned" income during the year. For rental property or land, provide an address. Provide full names of any mutual funds. For an IRA or retirement plan that is *self-directed*, list the underlying assets worth more than $1,000. For an IRA or retirement plan that is not selfdirected, name the institution holding the account.

Exclude: Your personal residence(s) (unless there is rental income), any debt owed to you by your spouse, or by your or your spouse's child, parent, or sibling, any deposits totalling $5,000 or less in personal savings accounts, any financial interests in or income derived from U.S. Government retirement programs.

If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC) or is jointly held (JT), in the optional column on the far left.

BLOCK B — Value of Asset

at close of reporting year. If you use a valuation method other than fair market value, please specify the method used. If an asset was sold and is included only because it generated income, the value should be "None."

BLOCK C — Type of Income

BLOCK D — Amount of Income

For IRA's and retirement plans that are *not* self-directed, you may write in "NA" for income.

BLOCK E — Transaction

Indicate if asset was purchased (P), sold (S), or exchanged (E) in reporting year.

	BLOCK A	B: A None	B: B $1 – $1,000	B: C $1,001 – $15,000	B: $15,001 – $50,000	B: E $50,001 – $100,000	B: F $100,001 – $250,000	B: G $250,001 – $500,000	B: H $500,001 – $1,000,000	B: I $1,000,001 – $5,000,000	B: J $5,000,001 – $25,000,000	B: K $25,000,001 – $50,000,000	B: L Over $50,000,000	C: DIVIDENDS	C: RENT	C: INTEREST	C: CAPITAL GAINS	C: EXCEPTED TRUST	C: QUALIFIED BLIND TRUST	C: Other Type of Income (Specify. For Example, Partnership Income or Farm Income)	D: I None	D: II $1 – $200	D: III $201 – $1,000	D: IV $1,001 – $2,500	D: V $2,501 – $5,000	D: VI $5,001 – $15,000	D: VII $15,001 – $50,000	D: VIII $50,001 – $100,000	D: IX $100,001 – $1,000,000	D: X $1,000,001 – $5,000,000	D: XI Over $5,000,000	E
SP, DC, JT	*Examples*		Indefinite											X							Royalties											P
SP	Mega Corp. Stock					X																										
	Simon & Schuster						X									X																
	1st Bank of Paducah, KY accounts																															
	2014 MADISON AVE, BALT. MD					X									X									X								
JT	5809 LEITHWAICK, BALT. MD					X															X											
	2225 ST. PAUL ST., BALT. MD					X											X									X						S
	ELIJAH E. CUMMINGS, P.A.	X																			X	NOTE: PER HOUSE RULES, CONTINUED LEGAL EXISTENCE FOR RESOLVING CLAIMS ONLY									

For additional assets and unearned income, use next page.

SCHEDULE III — ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Name ELIJAH E. CUMMINGS | Page 5 of 9

SP, DC, JT	BLOCK A Asset and/or Income Source	BLOCK B Year-End Value of Asset												BLOCK C Type of Income							BLOCK D Amount of Income										BLOCK E Transaction
		A None	B $1 – $1,000	C $1,001 – $15,000	D $15,001 – $50,000	E $50,001 – $100,000	F $100,001 – $250,000	G $250,001 – $500,000	H $500,001 – $1,000,000	I $1,000,001 – $5,000,000	J $5,000,001 – $25,000,000	K $25,000,001 – $50,000,000	L Over $50,000,000	DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Type of Income (Specify)	I None	II $1 – $200	III $201 – $1,000	IV $1,001 – $2,500	V $2,501 – $5,000	VI $5,001 – $15,000	VII $15,001 – $50,000	VIII $50,001 – $100,000	IX $100,001 – $1,000,000	X $1,000,001 – $5,000,000	XI Over $5,000,000	P, S, E
SP	FIRST FINANCIAL FCLL		X													X						X									
SP	JOHN ALDEN LIFE INS. ANN		X													X						X	X								
SP	KEMPER MUTUAL FUNDS		X											X								X	X								
SP	CHUBB LIFE INS. ACCT		X											X								X									
SP	PIONEER II FUND		X											X								X									
SP	PIONEER CAPITAL GROWTH FUND		X											X								X									
SP	WESTERN RESERVE LIFE INS		X													X						X									

This page may be copied if more space is required.

Name ELIZABETH E. CUMMINGS | Page 6 of 9

SCHEDULE IV — TRANSACTIONS

Report any purchase, sale, or exchange by you, your spouse, or dependent child during the reporting year of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child, or the purchase or sale of your personal residence, unless it is rented out.

SP, DC, JT	Asset	Type of Transaction: PURCHASE	SALE	EXCHANGE	Date (MO/DAY/YR)	Amount of Transaction: B $1,001–$15,000	C $15,001–$50,000	D $50,001–$100,000	E $100,001–$250,000	F $250,001–$500,000	G $500,001–$1,000,000	H $1,000,001–$5,000,000	I $5,000,001–$25,000,000	J $25,000,001–$50,000,000	K Over $50,000,000
SP	*Example* Mega Corporation Common Stock	X			10–12–97		X								
	INSTALLMENT SALE OF 2225 ST. PAUL ST., BALT., MD [SEE SCHEDULE III & 5/96 REPORT]		X		ONGOING	X									

This page may be copied if more space is required.

Name ELIJAH E. CUMMINGS | Page 7 of 9

SCHEDULE V — LIABILITIES

Report liabilities of over $10,000 owed to any one creditor ***at any time*** during the reporting period by you, your spouse, or dependent child. Mark the highest amount owed during the year. **Exclude:** Any mortgage on your personal residence (unless it is rented out), loans secured by automobiles, household furniture, or appliances; and liabilities owed to a spouse, or the child, parent, or sibling of you or your spouse. Report ***revolving charge accounts*** only if the balance at the end of the reporting period exceeded $10,000.

SP, DC, JT	Creditor	Type of Liability	Amount of Liability B ($10,001–$15,000)	C ($15,001–$50,000)	D ($50,001–$100,000)	E ($100,001–$250,000)	F ($250,001–$500,000)	G ($500,001–$1,000,000)	H ($1,000,001–$5,000,000)	I ($5,000,001–$25,000,000)	J ($25,000,001–$50,000,000)	K (Over $50,000,000)
Example	*First Bank of Wilmington, Delaware*	*Mortgage on 123 Main St., Dover, Del*				X						
	IDEAL SAVINGS & LOAN, BALT., MD	MORTGAGE: 2225 ST. PAUL		X								
	HARBOR BANK, BALT., MD	PERSONAL LOAN	X	[PAID IN FULL: 1/98]								
	FIRST NATIONAL BANK OF MD	PERSONAL LOAN		X	[PAID IN FULL 5/98]							
	CENLARD FED. S. BANK, TRENTON, N.J.	MORTGAGE: 2014 MADISON AVE			X							

SCHEDULE VI — GIFTS

Report the source, a brief description, and the value of all gifts totalling more than $250 received by you, your spouse, or a dependent child from any source during the year.

Exclude: Gifts from relatives, gifts of personal hospitality of an individual, local meals, and gifts to a spouse or dependent child that are totally independent of his or her relationship to you. Gifts with a value of $100 or less need not be added towards the $250 disclosure threshold.

Note: The gift rule (House Rule 51) prohibits gifts except as specifically provided in the rule.

Source	Description	Value
Example: Mr. Joseph H. Smith, Anytown, Anystate	*Silver Platter (determination on personal friendship received from Committee on Standards)*	*$470*
ALPHA PHI ALPHA, BALT., MD	WON RAFFLE EXEMPT FROM H. GIFT RULE 52 PER SEC. 1(c)(10)	$1,000

Use additional sheets if more space is required.

SCHEDULE VII —TRAVEL PAYMENTS AND REIMBURSEMENTS

Identify the source and list travel itinerary, dates, and nature of expenses provided for travel and travel-related expenses totalling more than $250 received by you, your spouse, or a dependent child during the reporting period. Indicate whether a family member accompanied the traveler at the sponsor's expense, and the amount of time, if any, that was not at the sponsor's expense. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor.

Exclude: Travel-related expenses provided by federal, state, and local governments, or by a foreign government required to be separately reported under the Foreign Gifts and Decorations Act (5 U.S.C. § 7342); travel paid for by a Federal political committee; travel provided to a spouse or dependent child that is totally independent of his or her relationship to you.

Source	Date(s)	Point of Departure—Destination—Point of Return	Lodging? (Y/N)	Food? (Y/N)	Was a Family Member Included? (Y/N)	Any time not at sponsor's expense
Examples						
Chicago Chamber of Commerce	Mar 2	Wash , D C —Chicago—Wash , D C	N	N	N	N
Roycroft Corporation	Aug 6–13	Wash , D C —Los Angeles—Cleveland	Y	Y	Y	4 Days
AMERICAN ASS'N RAILROADS	JAN. 16-18	D.C.- BOCA RATON, FL-DC	Y	Y	N	N
MAGIC BAR ASS'N	NOV. 25-26	BALT.-BIRMINHAM, AL-BALT	Y	Y	N	N
POPULATION ACTION INT'L	11/28-12/7	D.C.-ZAMBIA/GHANA-DC	Y	Y	N	N

This page may be copied if more space is required.

SCHEDULE VIII — POSITIONS

Report all positions, compensated or uncompensated, held during the current calendar year as an officer, director, trustee of an organization, partner, proprietor, representative, employee, or consultant of any corporation, firm, partnership, or other business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States.

Exclude: Positions held in any religious, social, fraternal, or political entities; positions solely of an honorary nature; and positions listed on Schedule I

Position	Name of Organization
DIRECTOR	ELEBIE BLAKE CULTURAL CENTER, BALT., MD.
DIRECTOR	BALTIMORE ZOOLOGICAL SOCIETY, BALT., MD.
DIRECTOR	LEARNING TO LEAD, INC., BALT., MD.
OFFICER/DIRECTOR	ELIJAH E. CUMMINGS, P.A. [SEE NOTE SCHEDULE III]
MEMBER	UNIVERSITY OF MARYLAND SCHOOL OF LAW BOARD OF VISITORS

SCHEDULE IX — AGREEMENTS

Identify the date, parties to, and general terms of any agreement or arrangement with respect to future employment, a leave of absence during the period of government service, continuation or deferral of payments by a former or current employer other than the U.S Government; or continuing participation in an employee welfare or benefit plan maintained by a former employer

Date	Parties To	Terms of Agreement
	NONE	

Use additional sheets if more space is required.

ELIJAH E. CUMMINGS
7TH DISTRICT, MARYLAND

1632 LONGWORTH BUILDING
WASHINGTON, DC 20515
(202) 225-4741
FAX (202) 225-3178

COMMITTEE ON
TRANSPORTATION AND
INFRASTRUCTURE

COMMITTEE ON
GOVERNMENT REFORM
AND OVERSIGHT

DEMOCRATIC
POLICY COMMITTEE

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OFFICE OF THE CLERK
HOUSE OF REPRESENTATIVE

Congress of the United States
House of Representatives
Washington, DC 20515

MAY 15 1998

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DISTRICT OFFICES:

3000 DRUID PARK DRIVE
BALTIMORE, MD 21215
(410) 367-1900
FAX (410) 367-5331

7900 LIBERTY ROAD
BALTIMORE, MD 21207
(410) 496-2010
FAX (410) 496-2016

754 FREDERICK ROAD
CATONSVILLE, MD 21228
(410) 719-8777
FAX (410) 455-0110

May 15, 1998

Honorable Robin H. Carle, Clerk
U.S. House of Representatives
Legislative Resource Center
Room B-106, Cannon House Office Building
Washington, D.C. 20515

D
MC

Re: Letter Amendment of Financial Disclosure Statement: 5/15/97.

Dear Ms. Carle:

By the original and two copies of this letter enclosed, please supplement and amend my financial disclosure statement dated 5/15/97 for the applicable reporting year 1996 to disclose the following information:

The personal loan set forth on Schedule V as owed to Maryland National Bank (Nation's Bank) (incorrectly, due to clerical error) was actually owed to First National Bank of Maryland, Baltimore, MD. This loan was paid in full as of May, 1998.

Thank you for your assistance in clarifying this information.

Sincerely,

Elijah E. Cummings
Member of Congress

EEC: mc

PRINTED ON RECYCLED PAPER

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1997

Form A
For use by Members, officers, and employees

98 MAY 14 PM 2:07

OFFICE OF THE CLERK
HOUSE OF REPRESENTATIVES

Randy "Duke" Cunningham
(Full Name)

2238 Rayburn House Office Building
(Mailing Address)

Washington DC 20515

Daytime Telephone 202-225-5452

HAND DELIVERED 6
(Office Use Only)

Filer Status
[X] Member of the U.S. House of Representatives — State CA, District 51
[ ] Officer or Employee — Employing Office

Report Type
[X] Annual (May 15)
[ ] Amendment
[ ] Termination — Termination Date

A $200 penalty shall be assessed against anyone who files more than 30 days late.

PRELIMINARY INFORMATION -- ANSWER EACH OF THESE QUESTIONS

I. Did you or your spouse have "earned" income (e.g., salaries or fees) of $200 or more from any source in the reporting period? **If yes, complete and attach Schedule I.** — Yes [X] No [ ]

II. Did any individual or organization make a donation to charity in lieu of paying you for a speech, apppearance, or article in the reporting period? **If yes, complete and attach Schedule II.** — Yes [ ] No [X]

III. Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? **If yes, complete and attach Schedule III.** — Yes [X] No [ ]

IV. Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset worth more than $1,000 in the reporting period? **If yes, complete and attach Schedule IV.** — Yes [ ] No [X]

V. Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? **If yes, complete and attach Schedule V.** — Yes [X] No [ ]

VI. Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $250 and not otherwise exempt)? **If yes, complete and attach Schedule VI.** — Yes [ ] No [X]

VII. Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $250 from one source)? **If yes, complete and attach Schedule VII.** — Yes [X] No [ ]

VIII. Did you hold any reportable positions on or before the date of filing in the current calendar year? **If yes, complete and attach Schedule VIII.** — Yes [ ] No [X]

IX. Did you have any reportable agreement or arrangement with an outside entity? **If yes, complete and attach Schedule IX.** — Yes [ ] No [X]

Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION -- ANSWER EACH OF THESE QUESTIONS

TRUSTS - Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child? — Yes [ ] No [X]

EXEMPTION Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption? — Yes [ ] No [X]

CERTIFICATION -- THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended. The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct or its designee. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil penalties and criminal sanctions (See 5 U.S.C. app. 4, 104 and 18 U.S.C. 1001)

SIGNATURE OF REPORTING INDIVIDUAL Randy "Duke" Cunningham

DATE (Month/Day/Year) 14 May 98

SCHEDULE I -- EARNED INCOME

List the source, type, and amount of earned income from any source (other than the filer's current employment by the U.S. Government) totalling $200 or more during the preceding calendar year. For a spouse, list the source and amount of any honoraria; list only the source for other spouse earned income exceeding $1,000.

	Source	Type	Amount
Examples	Keene State	Approved Teaching Fee	$10,000
	State of Maryland	Legislative Pension	$9,000
	Civil War Roundtable (Oct 2nd)	Spouse Speech	$1,000
	Ontario County Board of Education	Spouse Salary	NA
	Encinitas Union School District	spouse salary	NA

For payments to charity in lieu of honoraria, use Schedule II.

SCHEDULE III -- ASSETS AND "UNEARNED" INCOME

	BLOCK A **Asset and/or Income Source** Identify (a) each asset held for investment or production of income with a fair market value exceeding $1,000 at the end of the reporting year, and (b) any other asset or source of income which generated more than $200 in "unearned" income during the year. For rental property or land, provide an address. Provide full names of any mutual funds. For an IRA or retirement plan that is *self-directed*, list the underlying assets worth more than $1,000. For an IRA or retirement plan that is *not* self-directed, name the institution holding the account. **Exclude:** Your personal residence(s) (unless there is rental income); any debt owed to you by your spouse, or by your or your spouse's child, parent, or sibling; any deposits totalling $5,000 or less in personal savings accounts; any financial interests in or income derived from U.S. Government retirement programs. If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC) or is jointly held (JT), in the optional column on the far left.	BLOCK B **Value of Asset** at close of reporting year If you use a valuation method other than fair market value, please specify the method used If an asset was sold and is included only because it generated income, the value should be "None."	BLOCK C **Type of Income** If other than one of the listed categories, specify the type of income by writing a brief description in this block	BLOCK D **Amount of Income** For IRA's and retirement plans that are *not* self-directed, you may write in "NA" for income.	BLOCK E **Transaction** Indicate if asset was purchased(P), sold(S), or exchanged(E) in reporting year.
SP DC JT	*Examples* SP Mega Corp Stock 123 Main St., Dover, Del 1st Bank of Paducah, KY accounts	$15,001 - $50,000 $250,001 - $500,000 $50,001 - $100,000	Dividends Rent Interest	$201 - $1,000 $1,001 - $2,500 $5,001 - $15,000	P
	Top Gun Enterprises - sole share holder	$250,001 - $500,000	Capital Gains and Dividends	$5,001 - $15,000	
	Mission Valley Federal Credit Union	$15,001 - $50,000	Interest	$201 - $1,000	
	Union Bank - Miramar - checking	$15,001 - $50,000	Interest	$1,001 - $2,500	
	Union Bank - Miramar - checking	$1,001 - $15,000	Interest	$1,001 - $2,500	
SP	IRA/Union Bank Miramar	$15,001 - $50,000	Interest	$1,001 - $2,500	
	IRA/Union Bank Miramar	$15,001 - $50,000	Interest	$1,001 - $2,500	
JT	Congressional Federal Credit Union - checking	$1 - $1,000	Interest	$1 - $200	

SCHEDULE III -- ASSETS AND "UNEARNED" INCOME

JT	Congressional Federal Credit Union - savings	$1 - $1,000	Interest	$1 - $200	
DC	Union Bank - savings	$1,001 - $15,000	Interest	$1 - $200	
DC	Union Bank - savings	$1,001 - $15,000	Interest	$1 - $200	
	Note secured by Deed of Trust located at Elsworth/parcel #386-410-28, debtor Calvin Goad	$50,001 - $100,000	Interest	$5,001 - $15,000	
JT	580 Camino De La Reina #229, San Diego, CA	$100,001 - $250,000	Rent	$5,001 - $15,000	

SCHEDULE V -- LIABILITIES

Report liabilities of over $10,000 owed to any one creditor *at any time* during the reporting period by you, your spouse, or dependent child. Mark the highest amount owed during the year.
Exclude: Any mortgage on your personal residence (unless it is rented out); loans secured by automobiles, household furniture, or appliances; and liabilities owed to a spouse, or the child, parent, or sibling of you or your spouse. Report *revolving charge accounts* only if the balance at the end of the reporting period exceeded $10,000.

SP,DC,JT	Creditor	Type of Liability	Amount of Liability
Example	First Bank of Wilmington, Delaware	Mortgage on 123 Main St., Dover, Del	$100,001 - $250,000
JT	Homeside Lending, Inc., San Diego, CA	Mortgage on 580 Camino De La Reina #229, San Diego, CA	$100,001 - $250,000

SCHEDULE VII -- TRAVEL PAYMENTS AND REIMBURSEMENTS

Identify the source and list travel itinerary, dates, and nature of expenses provided for travel and travel-related expenses totalling more than $250 received by you, your spouse, or a dependent child during the reporting period. Indicate whether a family member accompanied the traveler at the sponsor's expense, and the amount of time, if any, that was not at the sponsor's expense. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor.
Exclude: Travel-related expenses provided by federal, state and local governments, or by a foreign government required to be separately reported under the Foreign Gifts and Decorations Act (5 U.S.C. 7342), travel paid for by a Federal political committee; travel provided to a spouse or dependent child that is totally independent of his or her relationship to you.

Source	Date(s)	Point of Departure–Destination–Point of Return	Lodging? (Y/N)	Food? (Y/N)	Was a Family Member Included? (Y/N)	Any time not at sponsor's expense
Examples. Chicago Chamber of Commerce	Mar 2	Wash., D.C.-Chicago-Wash., D.C.	N	N	N	N
Mega Corporation	Aug 6-13	Wash., D.C.-Los Angeles-Cleveland	Y	Y	Y	4 Days
National Security Caucus Foundation	Aug 8-11	Washington, D.C.-Philippines-Washington, D.C.	Y	Y	N	N
American Hellenic Institute Inc	Aug 23-30	Washington, D.C.-Greece-Washington, D.C.	Y	Y	N	N
Serbian Unity Congress	Sept 27-28	Washington, D.C.-Pittsburg-Washington, D.C.	Y	N	N	N

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MC (Office Use Only)

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1997

FORM A
For use by Members, officers, and employees

Pat Danner
(Full Name)

1207 Longworth Building
(Mailing Address)

Washington, D. C. 20515

202-225-7041
Daytime Telephone

Filer Status	[X] Member of the U.S. House of Representatives	State/District: MO 06	[ ] Officer or Employee	Employing Office	
Report Type	[X] Annual (May 15)	[ ] Amendment	[ ] Termination	Termination Date	

A *$200 penalty* shall be assessed against anyone who files more than 30 days late.

PRELIMINARY INFORMATION — ANSWER EACH OF THESE QUESTIONS

I. Did you or your spouse have "earned" income (e.g., salaries or fees) of $200 or more from any source in the reporting period? **If yes, complete and attach Schedule I** — Yes [X] No [ ]

II. Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? **If yes, complete and attach Schedule II.** — Yes [ ] No [X]

III. Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? **If yes, complete and attach Schedule III.** — Yes [X] No [ ]

IV. Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset worth more than $1,000 in the reporting period? **If yes, complete and attach Schedule IV** — Yes [X] No [ ]

V. Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? **If yes, complete and attach Schedule V.** — Yes [X] No [ ]

VI. Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $250 and not otherwise exempt)? **If yes, complete and attach Schedule VI.** — Yes [ ] No [X]

VII. Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $250 from one source)? **If yes, complete and attach Schedule VII.** — Yes [ ] No [X]

VIII. Did you hold any reportable positions on or before the date of filing in the current calendar year? **If yes, complete and attach Schedule VIII.** — Yes [ ] No [X]

IX. Did you have any reportable agreement or arrangement with an outside entity? **If yes, complete and attach Schedule IX.** — Yes [ ] No [X]

Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION — ANSWER EACH OF THESE QUESTIONS

TRUSTS—Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child? — Yes [ ] No [X]

EXEMPTION—Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption? — Yes [ ] No [X]

CERTIFICATION — THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended. The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct or its designee. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil penalties and criminal sanctions (*See* 5 U.S.C. app. 4, §104 and 18 U.S.C. §1001).

SIGNATURE OF REPORTING INDIVIDUAL: Pat Danner

DATE (Month/Day/Year): May 14, 1997

811

Name Pat Danner	Page 2 of 10

SCHEDULE I — EARNED INCOME

List the source, type, and amount of earned income from any source (other than the filer's current employment by the U.S. Government) totalling $200 or more during the preceding calendar year. For a spouse, list the source and amount of any honoraria; list only the source for other spouse earned income exceeding $1,000.

Source	Type	Amount
Examples: Keene/Idaho State of Maryland Civil War Roundtable (Oct. 2nd) Ontario County Board of Education	Approved Teaching Fee Legislative Pension Spouse Speech Spouse Salary	$6,000 $9,000 $1,000 NA
AETNA (Spouse--Annuity)	TWA Retirement	N/A
State of Missouri	Legislative Pension	11,509.51

For payments to charity in lieu of honoraria, use Schedule II.

Name Pat Danner | Page 3 of 10

SCHEDULE III — ASSETS AND "UNEARNED" INCOME

BLOCK A — Asset and/or Income Source

Identify (a) each asset held for investment or production of income with a fair market value exceeding $1,000 at the end of the reporting year, and (b) any other asset or source of income which generated more than $200 in "unearned" income during the year. For rental property or land, provide an address. Provide full names of any mutual funds. For an IRA or retirement plan that is *self directed*, list the underlying assets worth more than $1,000. For an IRA or retirement plan that is not self directed, name the institution holding the account.

Exclude: Your personal residence(s) (unless there is rental income), any debt owed to you by your spouse, or by your or your spouse's child, parent, or sibling, any deposits totalling $5,000 or less in personal savings accounts; any financial interests in or income derived from U.S. Government retirement programs.

If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC) or is jointly held (JT) in the optional column on the far left.

BLOCK B — Value of Asset

at close of reporting year.
If you use a valuation method other than fair market value, please specify the method used.
If an asset was sold and is included only because it generated income, the value should be "None."

BLOCK C — Type of Income

BLOCK D — Amount of Income

For IRA's and retirement plans that are *not* self directed, you may write in "NA" for income

BLOCK E — Transaction

Indicate if asset was purchased (P), sold (S), or exchanged (E) in reporting year

	BLOCK A	B	C	D	E	F	G	H	I	J	K	L	BLOCK C							BLOCK D											BLOCK E
		A None	B $1 - $1,000	C $1,001 - $2,500	D $2,501 - $5,000	E $5,001 - $15,000	F $15,001 - $50,000	G $50,001 - $100,000	H $100,001 - $250,000	I $250,001 - $500,000	J $500,001 - $1,000,000	K $1,000,001 - $5,000,000	L Over $5,000,000	DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Type of Income (Specify, e.g. Earned Income, Royalties, Farm Income)	I None	II $1 - $200	III $201 - $1,000	IV $1,001 - $2,500	V $2,501 - $5,000	VI $5,001 - $15,000	VII $15,001 - $50,000	VIII $50,001 - $100,000	IX $100,001 - $1,000,000	X $1,000,001 - $5,000,000	XI Over $5,000,000	
SP DC JT	*Examples*		Indebtedness													X				Royalties									X		P S E P
JT	Prairie View Car Wash 6,550 NW Prairie View Rd. Kansas City, MO							X									Profits									X					
JT	Autowash #12, 2610 NE 60th Street Gladstone, MO							X									Profits									X					
JT	Cedarwoods Apts. 206-215 W. Main Smithville, MO								X					X												X					

For additional assets and unearned income, use next page

SCHEDULE III — ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Name Pat Danner | Page 4 of 10

	BLOCK A Asset and/or Income Source	BLOCK B Year-End Value of Asset											BLOCK C Type of Income						BLOCK D Amount of Income										BLOCK E Transaction
SP DC JT		A None	B $1 – $1,000	C $1,001 – $15,000	D $15,001 – $50,000	E $50,001 – $100,000	F $100,001 – $250,000	G $250,001 – $500,000	H $500,001 – $1,000,000	I $1,000,001 – $5,000,000	J $5,000,001 – $25,000,000	K $25,000,001 – $50,000,000	L Over $50,000,000	DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Type of Income (Specify)	I None	II $1 – $200	III $201 – $1,000	IV $1,001 – $2,500	V $2,501 – $5,000	VI $5,001 – $15,000	VII $15,001 – $50,000	VIII $50,001 – $100,000	IX $100,001 – $1,000,000	X $1,000,001 – $5,000,000	XI Over $5,000,000	P S E
SP	Meadowbrook Highlands Lot 5, N. Antioch Rd Gladstone, MO			X																	X										
JT	Grand River Partners Farm-Bedford, MO					X									Farm Income									X							
JT	Briarcliff Pt. Partners 209 NE 40th Terrace, Kansas City						X								X									X							
JT	Ventures North, Inc. I-35 & N Brighton, KC						X								X									X							
JT	Barclay Place Develop. Barry Rd & N Troost Kansas City, MO				X																X										
JT	Macon Co. Farm (40 acres) Macon, MO				X										Farm Income									X							
JT	Carroll Co. Farm (250 acres) Hale, MO					X									Farm Income									X							
JT	Duplex-5403 N. Washington Kansas City, MO					X									X						X										
SP	Members America Credit Union IRA							X								X							N/A								
JT	Members America Credit Union, IRA			X												X							X								
SP	Edward D. Jones Money Market Acct.								X							X							N/A								
SP	AHM (Management Co) LLC			X											Profits										X						

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SCHEDULE III — ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Name: Pat Danner | Page 5 of 10

SP. DC. JT	BLOCK A Asset and/or Income Source	BLOCK B Year-End Value of Asset											BLOCK C Type of Income						BLOCK D Amount of Income										BLOCK E Transaction
		A None	B $1 - $1,000	C $1,001 - $15,000	D $15,001 - $50,000	E $50,001 - $100,000	F $100,001 - $250,000	G $250,001 - $500,000	H $500,001 - $1,000,000	I $1,000,001 - $5,000,000	J $5,000,001 - $25,000,000	K $25,000,001 - $50,000,000	L Over $50,000,000	DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Type of Income (Specify)	I None	II $1 - $200	III $201 - $1,000	IV $1,001 - $2,500	V $2,501 - $5,000	VI $5,001 - $15,000	VII $15,001 - $50,000	VIII $50,001 - $100,000	IX $100,001 - $1,000,000	X $1,000,001 - $5,000,000	XI Over $5,000,000	P, S, E
SP	Brookshire II LLC (Subdivision)						X									X									X					
SP	KC Super 8 LLC Motel								X						X										X					
JT	Livingston County Farm				X															Farm Income					X					S
JT	Mid East Oil (Partial gas well)				X									X											X					
JT	MPRE LLC						X								X											X				
SP	NKCM LLC					X									X						X									
JT	Antioch Car Wash Kansas City, MO						X													Profits					X					
SP	SDRE LLC					X									X											X				

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SCHEDULE IV — TRANSACTIONS

Name: Pat Danner

Report any purchase, sale, or exchange by you, your spouse, or dependent child during the reporting year of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child, or the purchase or sale of your personal residence, unless it is rented out.

SP DC JT	Asset	Type of Transaction: PURCHASE	SALE	EXCHANGE	Date (MO/DAY/YR)	Amount of Transaction: B $1,001–$15,000	C $15,001–$50,000	D $50,001–$100,000	E $100,001–$250,000	F $250,001–$500,000	G $500,001–$1,000,000	H $1,000,001–$5,000,000	I $5,000,001–$25,000,000	J $25,000,001–$50,000,000	K Over $50,000,000
SP	*Example* Mega Corporation Common Stock	X			10-12-97		X								
SP	KC Super 8 LLC Motel		X		10-29-97		X								

This page may be copied if more space is required.

Name Pat Danner | Page 7 of 10

SCHEDULE V — LIABILITIES

Report liabilities of over $10,000 owed to any one creditor ***at any time*** during the reporting period by you, your spouse, or dependent child. Mark the highest amount owed during the year. **Exclude:** Any mortgage on your personal residence (unless it is rented out), loans secured by automobiles, household furniture, or appliances, and liabilities owed to a spouse, or the child, parent, or sibling of you or your spouse. Report ***revolving charge accounts*** only if the balance at the end of the reporting period exceeded $10,000.

SP, DC, JT	Creditor	Type of Liability	Amount of Liability									
			B $10,001 – $15,000	C $15,001 – $50,000	D $50,001 – $100,000	E $100,001 – $250,000	F $250,001 – $500,000	G $500,001 – $1,000,000	H $1,000,001 – $5,000,000	I $5,000,001 – $25,000,000	J $25,000,001 – $50,000,000	K Over $50,000,000
Example	First Bank of Wilmington, Delaware	Mortgage on 123 Main St., Dover, Del				X						
JT	Liberty Savings Bank (1/4 Interest)	Deed of Trust on Briarcliff Point Apts.				X						
JT	Liberty Savings Bank (1/4 Interest)	Deed of Trust on Ventures North Apts.				X						
JT	Boatman's Bank of Kansas City (1/2 interest)	Deed of Trust on Cedarwood Apts.						X				
JT	Hillcrest Bank of Kansas City (1/4 Interest)	Deed of Trust on NKCMLLC Motel						X				
JT	Platte Valley Bank-Smithville, MO (1/2 Interest)	Deed of Trust on Prairie View Car Wash			X							

SCHEDULE VI — GIFTS

Report the source, a brief description, and the value of all gifts totalling more than $250 received by you, your spouse, or a dependent child from any source during the year.

Exclude: Gifts from relatives, gifts of personal hospitality of an individual, local meals, and gifts to a spouse or dependent child that are totally independent of his or her relationship to you. Gifts with a value of $100 or less need not be added towards the $250 disclosure threshold.

Note: The gift rule (House Rule 51) prohibits gifts except as specifically provided in the rule.

Source	Description	Value
Example Mr. Joseph H. Smith, Anytown, Anystate	Silver Platter (determination on personal friendship received from Committee on Standards)	$270

Use additional sheets if more space is required.

Name Pat Danner | Page 8 of 10

SCHEDULE V — LIABILITIES

Report liabilities of over $10,000 owed to any one creditor ***at any time*** during the reporting period by you, your spouse, or dependent child. Mark the highest amount owed during the year. **Exclude**: Any mortgage on your personal residence (unless it is rented out), loans secured by automobiles, household furniture, or appliances, and liabilities owed to a spouse, or the child, parent, or sibling of you or your spouse. Report ***revolving charge accounts*** only if the balance at the end of the reporting period exceeded $10,000.

SP, DC, JT	Creditor	Type of Liability	Amount of Liability									
			B $10,001 – $15,000	C $15,001 – $50,000	D $50,001 – $100,000	E $100,001 – $250,000	F $250,001 – $500,000	G $500,001 – $1,000,000	H $1,000,001 – $5,000,000	I $5,000,001 – $25,000,000	J $25,000,001 – $50,000,000	K Over $50,000,000
Example	First Bank of Wilmington, Delaware	Mortgage on 123 Main St., Dover, Del				X						
JT	Boatmans Bank of Kansas City (1/2 Interest)	Deed of Trust on Autowash #12				X						
JT	MO 1st National Bank of Bookfield	Deed of Trust on Antioch Car Wash				X						
JT	Cameron Savings & Loan Cameron, MO (1/2 Interest)	Deed of Trust on Carroll County Farm			X							
JT	Liberty Savings Bank, Liberty, MO	Deed of Trust Stor-All LLC					X					

SCHEDULE VI — GIFTS

Report the source, a brief description, and the value of all gifts totalling more than $250 received by you, your spouse, or a dependent child from any source during the year.

Exclude: Gifts from relatives, gifts of personal hospitality of an individual, local meals, and gifts to a spouse or dependent child that are totally independent of his or her relationship to you. Gifts with a value of $100 or less need not be added towards the $250 disclosure threshold.

Note: The gift rule (House Rule 51) prohibits gifts except as specifically provided in the rule.

Source	Description	Value
Example Mr. Joseph H. Smith, Anytown, Anystate	Silver Platter (determination on personal friendship received from Committee on Standards)	$270

Use additional sheets if more space is required.

Name Pat Danner | Page 9 of 10

SCHEDULE VII —TRAVEL PAYMENTS AND REIMBURSEMENTS

Identify the source and list travel itinerary, dates, and nature of expenses provided for travel and travel-related expenses totalling more than $250 received by you, your spouse, or a dependent child during the reporting period. Indicate whether a family member accompanied the traveler at the sponsor's expense, and the amount of time, if any, that was not at the sponsor's expense. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor.

Exclude: Travel-related expenses provided by federal, state, and local governments, or by a foreign government required to be separately reported under the Foreign Gifts and Decorations Act (5 U.S.C. § 7342); travel paid for by a Federal political committee; travel provided to a spouse or dependent child that is totally independent of his or her relationship to you.

Source	Date(s)	Point of Departure—Destination—Point of Return	Lodging? (Y/N)	Food? (Y/N)	Was a Family Member Included? (Y/N)	Any time not at sponsor's expense
Examples Chicago Chamber of Commerce	Mar 2	Wash., D.C.—Chicago—Wash., D.C.	N	N	N	N
Roycroft Corporation	Aug. 6–13	Wash., D.C.—Los Angeles—Cleveland	Y	Y	Y	4 Days
Aspen Institute	Mar 7-- Mar 9,1997	Wash DC-Hershey, PA & RETURN	Y	Y	Y	N

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SCHEDULE VIII — POSITIONS

Report all positions, compensated or uncompensated, held during the current calendar year as an officer, director, trustee of an organization, partner, proprietor, representative, employee, or consultant of any corporation, firm, partnership, or other business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States

Exclude: Positions held in any religious, social, fraternal, or political entities, positions solely of an honorary nature, and positions listed on Schedule I

Position	Name of Organization
	NONE

SCHEDULE IX — AGREEMENTS

Identify the date, parties to, and general terms of any agreement or arrangement with respect to future employment, a leave of absence during the period of government service, continuation or deferral of payments by a former or current employer other than the U S Government, or continuing participation in an employee welfare or benefit plan maintained by a former employer

Date	Parties To	Terms of Agreement

Use additional sheets if more space is required.

HAND DELIVERED

98 JUN 11 AM 10:10

PAT DANNER
6TH DISTRICT, MISSOURI
COMMITTEE ON TRANSPORTATION AND INFRASTRUCTURE
SUBCOMMITTEES
SURFACE TRANSPORTATION
AVIATION
COMMITTEE ON INTERNATIONAL RELATIONS
SUBCOMMITTEE
INTERNATIONAL ECONOMIC POLICY AND TRADE

Congress of the United States
House of Representatives
Washington, DC 20515–2506

WASHINGTON OFFICE
1207 LONGWORTH BUILDING
WASHINGTON, DC 20515
(202) 225-7041
FAX: (202) 225-8221

DISTRICT OFFICES
U.S. POST OFFICE, ROOM 330
201 SOUTH 8TH STREET
ST. JOSEPH, MO 64501-2240
(816) 233-9818
FAX: (816) 233-9848

5754 NORTH BROADWAY
BUILDING 3, SUITE 2
KANSAS CITY, MO 64118-3998
(816) 455-2256
FAX: (816) 455-2153

June 10, 1998

Robin Carle, Clerk
U. S. House of Representatives
Legislative Resource Center
B-106 Cannon House Office Building
Washington, D. C. 20515-6612

(11)

MC

Dear Robin:

Attached you will find a xerox copy of my Financial Disclosure Statement for 1997. I would like to amend this statement to provide more specificity to Schedule III "Assets and "Unearned" Income, Page 5 of 10.

These assets should be described in the following terms:

MPRE,LLC is a development company which is owned by me alone

NKCM, LLC is a new motel owned by my spouse, C. Markt Meyer

SDRE, LLC is a development company owned by my spouse, C. Markt Meyer

Should you have any questions in this regard, please do not hesitate to contact me at 225-7041. Thank you for your attention.

Best regards,

Pat Danner
Member of Congress

PD:chm
Enclosures

PRINTED ON RECYCLED PAPER

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1997

FORM A
For use by Members, officers, and employees

RECEIVED
98 JUN 11 AM 10:19
Clerk

5-15

Pat Danner
(Full Name)

1207 Longworth Building
(Mailing Address)

202-225-7041
Daytime Telephone

Washington, D. C. 20515

HAND DELIVERED
(Office Use Only)

Filer Status	[X] Member of the U S House of Representatives	State MO District 06	[ ] Officer or Employee	Employing Office
Report Type	[X] Annual (May 15)	[ ] Amendment	[ ] Termination	Termination Date

A *$200 penalty* shall be assessed against anyone who files more than 30 days late.

PRELIMINARY INFORMATION — ANSWER EACH OF THESE QUESTIONS

I	Did you or your spouse have "earned" income (e g , salaries or fees) of $200 or more from any source in the reporting period? **If yes, complete and attach Schedule I.**	Yes [X]	No [ ]	VI Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i e., aggregating more than $250 and not otherwise exempt)? **If yes, complete and attach Schedule VI.**	Yes [ ] No [X]
II	Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? **If yes, complete and attach Schedule II.**	Yes [ ]	No [X]	VII Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $250 from one source)? **If yes, complete and attach Schedule VII.**	Yes [ ] No [X]
III	Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? **If yes, complete and attach Schedule III.**	Yes [X]	No [ ]	VIII Did you hold any reportable positions on or before the date of filing in the current calendar year? **If yes, complete and attach Schedule VIII.**	Yes [ ] No [X]
IV	Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset worth more than $1,000 in the reporting period? **If yes, complete and attach Schedule IV.**	Yes [X]	No [ ]	IX Did you have any reportable agreement or arrangement with an outside entity? **If yes, complete and attach Schedule IX.**	Yes [ ] No [X]
V	Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? **If yes, complete and attach Schedule V.**	Yes [X]	No [ ]	Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.	

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION — ANSWER EACH OF THESE QUESTIONS

TRUSTS	Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child?	Yes [ ]	No [X]
EXEMPTION	Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption?	Yes [ ]	No [X]

CERTIFICATION — THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct or its designee Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil penalties and criminal sanctions (*See* 5 U S C app 4, §104 and 18 U S C §1001)

SIGNATURE OF REPORTING INDIVIDUAL Pat Danner

DATE (Month/Day/Year) May 14, 1997

Name	Pat Danner	Page 2 of 10

SCHEDULE I — EARNED INCOME

List the source, type, and amount of earned income from any source (other than the filer's current employment by the U.S. Government) totalling $200 or more during the preceding calendar year. For a spouse, list the source and amount of any honoraria; list only the source for other spouse earned income exceeding $1,000.

	Source	Type	Amount
Examples	Keene State	Approved Teaching Fee	$6,000
	State of Maryland	Legislative Pension	$9,000
	Civil War Roundtable (Oct 2nd)	Spouse Speech	$1,000
	Ontario County Board of Education	Spouse Salary	NA
	AETNA (Spouse--Annuity)	TWA Retirement	N/A
	State of Missouri	Legislative Pension	11,509.51

For payments to charity in lieu of honoraria, use Schedule II.

SCHEDULE III — ASSETS AND "UNEARNED" INCOME

Name: Pat Danner — Page 3 of 10

BLOCK A — Asset and/or Income Source

Identify (a) each asset held for investment or production of income with a fair market value exceeding $1,000 at the end of the reporting year, and (b) any other asset or source of income which generated more than $200 in "unearned" income during the year. For rental property or land, provide an address. Provide full names of any mutual funds. For an IRA or retirement plan that is *self-directed*, list the underlying assets worth more than $1,000. For an IRA or retirement plan that is not selfdirected, name the institution holding the account.

Exclude: Your personal residence(s) (unless there is rental income), any debt owed to you by your spouse, or by your or your spouse's child, parent, or sibling; any deposits totalling $5,000 or less in personal savings accounts; any financial interests in or income derived from U.S. Government retirement programs.

If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC) or is jointly held (JT), in the optional column on the far left.

BLOCK B — Value of Asset

at close of reporting year. If you use a valuation method other than fair market value, please specify the method used. If an asset was sold and is included only because it generated income, the value should be "None."

BLOCK C — Type of Income

BLOCK D — Amount of Income

For IRA's and retirement plans that are *not* self-directed, you may write in "NA" for income.

BLOCK E — Transaction

Indicate if asset was purchased (P), sold (S), or exchanged (E) in reporting year.

BLOCK A				BLOCK B											BLOCK C							BLOCK D										BLOCK E
				A None	B $1 – $1,000	C $1,001 – $15,000	$15,001 – $50,000	E $50,001 – $100,000	F $100,001 – $250,000	G $250,001 – $500,000	H $500,001 – $1,000,000	I $1,000,001 – $5,000,000	J $5,000,001 – $25,000,000	K $25,000,001 – $50,000,000	L Over $50,000,000	DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Type of Income (Specify: For Example, Partnership Income or Farm Income)	I None	II $1 – $200	III $201 – $1,000	IV $1,001 – $2,500	V $2,501 – $5,000	VI $5,001 – $15,000	VII $15,001 – $50,000	VIII $50,001 – $100,000	IX $100,001 – $1,000,000	X $1,000,001 – $5,000,000	XI Over $5,000,000	P, S, E
SP, DC, JT	*Examples*	SP	Mega Corp Stock					X								X																	P
			Simon & Schuster			Indefinite																Royalties								X			
			1st Bank of Paducah, KY accounts						X								X										X						
JT			Prairie View Car Wash 6550 NW Prairie View Rd. Kansas City, MO							X							Profits										X						
JT			Autowash #12, 2610 NE 60th Street Gladstone, MO							X							Profits										X						
JT			Cedarwoods Apts. 206-215 W. Main Smithville, MO								X					X											X						

For additional assets and unearned income, use next page.

SCHEDULE III — ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Name Pat Danner | Page 4 of 10

SP, DC, JT	BLOCK A Asset and/or Income Source	BLOCK B Year-End Value of Asset												BLOCK C Type of Income							BLOCK D Amount of Income										BLOCK E Transaction
		A None	B $1 – $1,000	C $1,001 – $15,000	D $15,001 – $50,000	E $50,001 – $100,000	F $100,001 – $250,000	G $250,001 – $500,000	H $500,001 – $1,000,000	I $1,000,001 – $5,000,000	J $5,000,001 – $25,000,000	K $25,000,001 – $50,000,000	L Over $50,000,000	DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Type of Income (Specify)	I None	II $1 – $200	III $201 – $1,000	IV $1,001 – $2,500	V $2,501 – $5,000	VI $5,001 – $15,000	VII $15,001 – $50,000	VIII $50,001 – $100,000	IX $100,001 – $1,000,000	X $1,000,001 – $5,000,000	XI Over $5,000,000	P, S, E
SP	Meadowbrook Highlands Lot 5, N. Antioch Rd Gladstone, MO			X																	X										
JT	Grand River Partners Farm-Bedford, MO					X										Farm Income								X							
JT	Briarcliff Pt. Partners 209 NE 40th Terrace, Kansas City						X									X								X							
JT	Ventures North, Inc. I-35 & N Brighton, KC						X									X								X							
JT	Barclay Place Develop. Barry Rd & N Troost Kansas City, MO				X																X										
JT	Macon Co. Farm (40 acres) Macon, MO				X											Farm Income								X							
JT	Carroll Co. Farm (250 acres) Hale, MO					X										Farm Income								X							
JT	Duplex-5403 N. Washington Kansas City, MO					X										X					X										
SP	Members America Credit Union IRA							X								X							N/A								
JT	Members America Credit Union, IRA				X											X							X								
SP	Edward D. Jones Money Market Acct.							X								X							N/A								
SP	AHM (Management Co) LLC			X												Profits									X						

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SCHEDULE III — ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Name: Pat Danner | Page 5 of 10

SP, DC, JT	BLOCK A: Asset and/or Income Source	BLOCK B: Year-End Value of Asset											BLOCK C: Type of Income							BLOCK D: Amount of Income											BLOCK E: Transaction
		A None	B $1 – $1,000	C $1,001 – $15,000	D $15,001 – $50,000	E $50,001 – $100,000	F $100,001 – $250,000	G $250,001 – $500,000	H $500,001 – $1,000,000	I $1,000,001 – $5,000,000	J $5,000,001 – $25,000,000	K $25,000,001 – $50,000,000	L Over $50,000,000	DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Type of Income (Specify)	I None	II $1 – $200	III $201 – $1,000	IV $1,001 – $2,500	V $2,501 – $5,000	VI $5,001 – $15,000	VII $15,001 – $50,000	VIII $50,001 – $100,000	IX $100,001 – $1,000,000	X $1,000,001 – $5,000,000	XI Over $5,000,000	P, S, E
SP	Brookshire II LLC (Subdivision)						X									X								X						
SP	KC-Super-8 LLC-Motel								X						X									X						
JT	Livingston County Farm					X														Farm Income				X						S
JT	Mid East Oil (Partial gas well)				X									X										X						
JT	MPRE LLC						X								X											X				
SP	NKCM LLC					X									X						X									
JT	Antioch Car Wash Kansas City, MO						X													Profits				X						
SP	SDRE LLC					X									X											X				

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SCHEDULE IV — TRANSACTIONS

Name: Pat Danner

Report any purchase, sale, or exchange by you, your spouse, or dependent child during the reporting year of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child, or the purchase or sale of your personal residence, unless it is rented out.

SP, DC, JT	Asset	Type of Transaction: PURCHASE	SALE	EXCHANGE	Date (MO/DAY/YR)	Amount of Transaction: B ($1,001–$15,000)	C ($15,001–$50,000)	D ($50,001–$100,000)	E ($100,001–$250,000)	F ($250,001–$500,000)	G ($500,001–$1,000,000)	H ($1,000,001–$5,000,000)	I ($5,000,001–$25,000,000)	J ($25,000,001–$50,000,000)	K (Over $50,000,000)
SP	*Example* Mega Corporation Common Stock	X			10-12-97		X								
SP	KC Super 8 LLC Motel		X		10-29-97		X								

This page may be copied if more space is required.

Name Pat Danner | Page 7 of 10

SCHEDULE V — LIABILITIES

Report liabilities of over $10,000 owed to any one creditor ***at any time*** during the reporting period by you, your spouse, or dependent child. Mark the highest amount owed during the year. **Exclude:** Any mortgage on your personal residence (unless it is rented out); loans secured by automobiles, household furniture, or appliances; and liabilities owed to a spouse, or the child, parent, or sibling of you or your spouse. Report ***revolving charge accounts*** only if the balance at the end of the reporting period exceeded $10,000.

SP, DC, JT	Creditor	Type of Liability	Amount of Liability										
			B $10,001– $15,000	C $15,001– $50,000	D $50,001– $100,000	E $100,001– $250,000	F $250,001– $500,000	G $500,001– $1,000,000	H $1,000,001– $5,000,000	I $5,000,001– $25,000,000	J $25,000,001– $50,000,000	K Over $50,000,000
	Example First Bank of Wilmington, Delaware	Mortgage on 123 Main St., Dover, Del				X						
JT	Liberty Savings Bank (1/4 Interest)	Deed of Trust on Briarcliff Point Apts.				X						
JT	Liberty Savings Bank (1/4 Interest)	Deed of Trust on Ventures North Apts.				X						
JT	Boatman's Bank of Kansas City (1/2 interest)	Deed of Trust on Cedarwood Apts.						X				
JT	Hillcrest Bank of Kansas City (1/4 Interest)	Deed of Trust on NKCMLLC Motel						X				
JT	Platte Valley Bank-Smithville, MO (1/2 Interest)	Deed of Trust on Prairie View Car Wash			X							

SCHEDULE VI — GIFTS

Report the source, a brief description, and the value of all gifts totalling more than $250 received by you, your spouse, or a dependent child from any source during the year.

Exclude: Gifts from relatives, gifts of personal hospitality of an individual, local meals, and gifts to a spouse or dependent child that are totally independent of his or her relationship to you. Gifts with a value of $100 or less need not be added towards the $250 disclosure threshold.

Note: The gift rule (House Rule 51) prohibits gifts except as specifically provided in the rule

Source	Description	Value
Example Mr. Joseph H. Smith, Anytown, Anystate	Silver Platter (determination on personal friendship received from Committee on Standards)	$270

Use additional sheets if more space is required.

SCHEDULE V — LIABILITIES

Report liabilities of over $10,000 owed to any one creditor ***at any time*** during the reporting period by you, your spouse, or dependent child. Mark the highest amount owed during the year. **Exclude:** Any mortgage on your personal residence (unless it is rented out); loans secured by automobiles, household furniture, or appliances; and liabilities owed to a spouse, or the child, parent, or sibling of you or your spouse. Report ***revolving charge accounts*** only if the balance at the end of the reporting period exceeded $10,000

SP, DC, JT	Creditor	Type of Liability	Amount of Liability									
			B $10,001– $15,000	C $15,001– $50,000	D $50,001– $100,000	E $100,001– $250,000	F $250,001– $500,000	G $500,001– $1,000,000	H $1,000,001– $5,000,000	I $5,000,001– $25,000,000	J $25,000,001– $50,000,000	K Over $50,000,000
	Example First Bank of Wilmington, Delaware	Mortgage on 123 Main St., Dover, Del				X						
JT	Boatmans Bank of Kansas City (1/2 Interest)	Deed of Trust on Autowash #12				X						
JT	MO 1st National Bank of Bookfield	Deed of Trust on Antioch Car Wash				X						
JT	Cameron Savings & Loan Cameron, MO (1/2 Interest)	Deed of Trust on Carroll County Farm			X							
JT	Liberty Savings Bank, Liberty, MO	Deed of Trust Stor-All LLC					X					

SCHEDULE VI — GIFTS

Report the source, a brief description, and the value of all gifts totalling more than $250 received by you, your spouse, or a dependent child from any source during the year

Exclude: Gifts from relatives, gifts of personal hospitality of an individual, local meals, and gifts to a spouse or dependent child that are totally independent of his or her relationship to you. Gifts with a value of $100 or less need not be added towards the $250 disclosure threshold

Note: The gift rule (House Rule 51) prohibits gifts except as specifically provided in the rule.

Source	Description	Value
Example Mr. Joseph H. Smith, Anytown, Anystate	Silver Platter (determination on personal friendship received from Committee on Standards)	$270

Use additional sheets if more space is required.

Name Pat Danner | Page 9 of 10

SCHEDULE VII —TRAVEL PAYMENTS AND REIMBURSEMENTS

Identify the source and list travel itinerary, dates, and nature of expenses provided for travel and travel-related expenses totalling more than $250 received by you, your spouse, or a dependent child during the reporting period. Indicate whether a family member accompanied the traveler at the sponsor's expense, and the amount of time, if any, that was not at the sponsor's expense. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor.

Exclude: Travel-related expenses provided by federal, state, and local governments, or by a foreign government required to be separately reported under the Foreign Gifts and Decorations Act (5 U.S.C. § 7342); travel paid for by a Federal political committee; travel provided to a spouse or dependent child that is totally independent of his or her relationship to you

Source	Date(s)	Point of Departure—Destination—Point of Return	Lodging? (Y/N)	Food? (Y/N)	Was a Family Member Included? (Y/N)	Any time not at sponsor's expense
Examples Chicago Chamber of Commerce	Mar. 2	Wash., D.C.—Chicago—Wash., D.C.	N	N	N	N
Roycroft Corporation	Aug. 6–13	Wash., D.C.—Los Angeles—Cleveland	Y	Y	Y	4 Days
Aspen Institute	Mar 7--Mar 9,1997	Wash DC-Hershey, PA & RETURN	Y	Y	Y	N

This page may be copied if more space is required.

SCHEDULE VIII — POSITIONS

Report all positions, compensated or uncompensated, held during the current calendar year as an officer, director, trustee of an organization, partner, proprietor, representative, employee, or consultant of any corporation, firm, partnership, or other business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States.

Exclude: Positions held in any religious, social, fraternal, or political entities; positions solely of an honorary nature; and positions listed on Schedule I.

Position	Name of Organization
	NONE

SCHEDULE IX — AGREEMENTS

Identify the date, parties to, and general terms of any agreement or arrangement with respect to: future employment; a leave of absence during the period of government service; continuation or deferral of payments by a former or current employer other than the U.S. Government; or continuing participation in an employee welfare or benefit plan maintained by a former employer.

Date	Parties To	Terms of Agreement

GPO 1998 46-260 (mac)

Use additional sheets if more space is required.

98 MAY 14 PM 3:32

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1997

FORM A
For use by Members, officers, and employees

Danny K. Davis
(Full Name)

1255 N. Austin
(Mailing Address)

Chicago, Illinois 60651

(773) 533-7520
Daytime Telephone

(202) 225-5006

HAND DELIVERED (9)

MC (Office Use Only)

Filer Status	[X] Member of the U.S. House of Representatives	State IL. District 7	[ ] Officer or Employee	Employing Office
Report Type	[X] Annual (May 15)	[ ] Amendment	[ ] Termination	Termination Date

A *$200 penalty* shall be assessed against anyone who files more than 30 days late.

PRELIMINARY INFORMATION — ANSWER EACH OF THESE QUESTIONS

I Did you or your spouse have "earned" income (e.g., salaries or fees) of $200 or more from any source in the reporting period? **If yes, complete and attach Schedule I.**	Yes [X]	No [ ]	VI Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $250 and not otherwise exempt)? **If yes, complete and attach Schedule VI.**	Yes [ ]	No [X]
II Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? **If yes, complete and attach Schedule II.**	Yes [X]	No [ ]	VII Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $250 from one source)? **If yes, complete and attach Schedule VII.**	Yes [X]	No [ ]
III Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? **If yes, complete and attach Schedule III.**	Yes [X]	No [ ]	VIII Did you hold any reportable positions on or before the date of filing in the current calendar year? **If yes, complete and attach Schedule VIII.**	Yes [ ]	No [X]
IV Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset worth more than $1,000 in the reporting period? **If yes, complete and attach Schedule IV.**	Yes [X]	No [ ]	IX Did you have any reportable agreement or arrangement with an outside entity? **If yes, complete and attach Schedule IX.**	Yes [ ]	No [X]
V Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? **If yes, complete and attach Schedule V.**	Yes [X]	No [ ]	**Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.**		

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION — ANSWER EACH OF THESE QUESTIONS

TRUSTS—Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child?	Yes [ ]	No [X]
EXEMPTION—Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption?	Yes [ ]	No [X]

CERTIFICATION — THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended. The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct or its designee. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil penalties and criminal sanctions (*See* 5 U.S.C. app. 4, §104 and 18 U.S.C. §1001)

SIGNATURE OF REPORTING INDIVIDUAL: Danny K. Davis

DATE (Month/Day/Year): May 14, 1998

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Name	Page 1 of 8
Danny K. Davis	

SCHEDULE I — EARNED INCOME

List the source, type, and amount of earned income from any source (other than the filer's current employment by the U.S. Government) totalling $200 or more during the preceding calendar year. For a spouse, list the source and amount of any honoraria; list only the source for other spouse earned income exceeding $1,000

Source	Type	Amount
Examples Keene State	Approved Teaching Fee	$6,000
State of Maryland	Legislative Pension	$9,000
Civil War Roundtable (Oct 2nd)	Spouse Speech	$1,000
Ontario County Board of Education	Spouse Salary	NA
Cook County Board	salary	4,166.58
Chicago Board of Education	spouse salary	42,809.40
Loss Prevention	salary	600.00
Public School Teacher's Pension	spouse pension	6,082.80

For payments to charity in lieu of honoraria, use Schedule II.

SCHEDULE II — PAYMENTS IN LIEU OF HONORARIA MADE TO CHARITY

List the source, activity (i.e , speech, appearance, or article), date, and amount of any payment made by the sponsor of an event to a charitable organization in lieu of an honorarium. A separate confidential list of charities receiving such payments must be filed directly with the Committee on Standards of Official Conduct. An envelope for transmitting the list is included in each Member's filing package

Source	Activity	Date	Amount
Examples Association of American Associations, Wash , D C XYZ Magazine	Speech Article	Feb 2, 1997 Aug 13, 1997	$2,000 $500
Artistic Impressions Chicago, Illinois	Speech	August 2, 199	169.00
Kmart Family Foundation	Cart Race	Sept. 10, 199	500.00

This page may be copied if more space is required.

Name Danny K. Davis | Page 3 of 8

SCHEDULE III — ASSETS AND "UNEARNED" INCOME

BLOCK A — Asset and/or Income Source

Identify (a) each asset held for investment or production of income with a fair market value exceeding $1,000 at the end of the reporting year, and (b) any other asset or source of income which generated more than $200 in "unearned" income during the year. For rental property or land, provide an address. Provide full names of any mutual funds. For an IRA or retirement plan that is *self-directed*, list the underlying assets worth more than $1,000. For an IRA or retirement plan that is not selfdirected, name the institution holding the account.

Exclude: Your personal residence(s) (unless there is rental income), any debt owed to you by your spouse, or by your or your spouse's child, parent, or sibling, any deposits totalling $5,000 or less in personal savings accounts, any financial interests in or income derived from U.S. Government retirement programs.

If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC) or is jointly held (JT), in the optional column on the far left.

BLOCK B — Value of Asset

at close of reporting year. If you use a valuation method other than fair market value, please specify the method used. If an asset was sold and is included only because it generated income, the value should be "None."

BLOCK C — Type of Income

BLOCK D — Amount of Income

For IRA's and retirement plans that are *not* self-directed, you may write in "NA" for income.

BLOCK E — Transaction

Indicate if asset was purchased (P), sold (S), or exchanged (E) in reporting year.

			A None	B $1 – $1,000	C $1,001 – $15,000	D $15,001 – $50,000	E $50,001 – $100,000	F $100,001 – $250,000	G $250,001 – $500,000	H $500,001 – $1,000,000	I $1,000,001 – $5,000,000	J $5,000,001 – $25,000,000	K $25,000,001 – $50,000,000	L Over $50,000,000	DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Type of Income (Specify. For Example Partnership Income or Farm Income)	I None	II $1 – $200	III $201 – $1,000	IV $1,001 – $2,500	V $2,501 – $5,000	VI $5,001 – $15,000	VII $15,001 – $50,000	VIII $50,001 – $100,000	IX $100,001 – $1,000,000	X $1,000,001 – $5,000,000	XI Over $5,000,000	
SP		SP	Mega Corp. Stock																														
DC	*Examples*			Indefinite																	Royalties												
JT			1st Bank of Paducah, KY accounts																														
	1428 S. Homan		X												X		X										X					S
	5730 W. Division							X							X										X							
	Community Bank of Lawndale				X												X					X										!
	Austin Bank of Chicago				X												X					X										

For additional assets and unearned income, use next page.

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SCHEDULE III — ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Name: Danny K. Davis

SP, DC, JT	BLOCK A: Asset and/or Income Source	BLOCK B: Year-End Value of Asset												BLOCK C: Type of Income							BLOCK D: Amount of Income										BLOCK E: Transaction
		A None	B $1 – $1,000	C $1,001 – $15,000	D $15,001 – $50,000	E $50,001 – $100,000	F $100,001 – $250,000	G $250,001 – $500,000	H $500,001 – $1,000,000	I $1,000,001 – $5,000,000	J $5,000,001 – $25,000,000	K $25,000,001 – $50,000,000	L Over $50,000,000	DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Type of Income (Specify)	I None	II $1 – $200	III $201 – $1,000	IV $1,001 – $2,500	V $2,501 – $5,000	VI $5,001 – $15,000	VII $15,001 – $50,000	VIII $50,001 – $100,000	IX $100,001 – $1,000,000	X $1,000,001 – $5,000,000	XI Over $5,000,000	P, S, E
	Variable Annuity Life Ins. Co.							X								X							X								SP
	Pegusas Fund		X													X						X										SP
	Chicago Teachers Credit Union			X												X						X										SP
	First Chicago Bank				X											X							X									
	Surburban Trust and Savings		X													X						X										SP
	Equi-Vest				X									X								X										SP
	Equi-Vest			X										X								X										SP
	Equi-Vest				X									X								X										SP
	Variable Annuity Life Ins. Co.				X											X						X										

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SCHEDULE III — ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Name Danny K. Davis

SP. DC. JT	BLOCK A Asset and/or Income Source	BLOCK B Year-End Value of Asset											BLOCK C Type of Income							BLOCK D Amount of Income										BLOCK E Transaction
		A None	B $1 – $1,000	C $1,001 – $15,000	D $15,001 – $50,000	E $50,001 – $100,000	F $100,001 – $250,000	G $250,001 – $500,000	H $500,001 – $1,000,000	I $1,000,001 – $5,000,000	J $5,000,001 – $25,000,000	K $25,000,001 – $50,000,000	L Over $50,000,000	DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Type of Income (Specify)	I None	II $1 – $200	III $201 – $1,000	IV $1,001 – $2,500	V $2,501 – $5,000	VI $5,001 – $15,000	VII $15,001 – $50,000	VIII $50,001 – $100,000	IX $100,001 – $1,000,000	X $1,000,001 – $5,000,000	XI Over $5,000,000	P, S, E
	Variable Annuity Life Insurance Company							X								X								X						
	Pegusas Fund		X													X						X								
	Chicago Teachers Credit Union			X												X						X								
	First Chicago Bank				X											X							X							
	Suburban Trust and Savings		X													X						X								
	Equi-Vest				X									X								X								
	Equi-Vest			X										X								X								
	Equi-Vest				X									X								X								

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Name Danny K. Davis | Page 5 of 8

SCHEDULE IV — TRANSACTIONS

Report any purchase, sale, or exchange by you, your spouse, or dependent child during the reporting year of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child, or the purchase or sale of your personal residence, unless it is rented out.

SP, DC, JT	Asset	Type of Transaction: PURCHASE	SALE	EXCHANGE	Date (MO/DAY/YR)	Amount of Transaction: B $1,001–$15,000	C $15,001–$50,000	D $50,001–$100,000	E $100,001–$250,000	F $250,001–$500,000	G $500,001–$1,000,000	H $1,000,001–$5,000,000	I $5,000,001–$25,000,000	J $25,000,001–$50,000,000	K Over $50,000,000
SP	*Example* Mega Corporation Common Stock	X			10–12–97		X								
	1428 S. Homan		X		6-3-97			X							

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SCHEDULE V — LIABILITIES

Report liabilities of over $10,000 owed to any one creditor ***at any time*** during the reporting period by you, your spouse, or dependent child. Mark the highest amount owed during the year. **Exclude:** Any mortgage on your personal residence (unless it is rented out); loans secured by automobiles, household furniture, or appliances, and liabilities owed to a spouse, or the child, parent, or sibling of you or your spouse. Report ***revolving charge accounts*** only if the balance at the end of the reporting period exceeded $10,000.

SP, DC, JT	Creditor	Type of Liability	Amount of Liability									
			B $10,001– $15,000	C $15,001– $50,000	D $50,001– $100,000	E $100,001– $250,000	F $250,001– $500,000	G $500,001– $1,000,000	H $1,000,001– $5,000,000	I $5,000,001– $25,000,000	J $25,000,001– $50,000,000	K Over $50,000,000
	Example First Bank of Wilmington, Delaware	Mortgage on 123 Main St., Dover, Del				X						
	Austin Bank of Chicago	Mortgage on 5730 W. Division		X								

SCHEDULE VI — GIFTS

Report the source, a bnef description, and the value of all gifts totalling more than $250 received by you, your spouse, or a dependent child from any source during the year.

Exclude: Gifts from relatives, gifts of personal hospitality of an individual, local meals, and gifts to a spouse or dependent child that are totally independent of his or her relationship to you. Gifts with a value of $100 or less need not be added towards the $250 disclosure threshold.

Note: The gift rule (House Rule 51) prohibits gifts except as specifically provided in the rule.

Source	Description	Value
Example: Mr. Joseph H. Smith, Anytown, Anystate	Silver Platter (determination on personal friendship received from Committee on Standards)	$270

Use additional sheets if more space is required.

Name	Danny K. Davis	Page 7 of 8

SCHEDULE VII —TRAVEL PAYMENTS AND REIMBURSEMENTS

Identify the source and list travel itinerary, dates, and nature of expenses provided for travel and travel-related expenses totalling more than $250 received by you, your spouse, or a dependent child during the reporting period. Indicate whether a family member accompanied the traveler at the sponsor's expense, and the amount of time, if any, that was not at the sponsor's expense. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor.

Exclude: Travel-related expenses provided by federal, state, and local governments, or by a foreign government required to be separately reported under the Foreign Gifts and Decorations Act (5 U.S.C § 7342); travel paid for by a Federal political committee; travel provided to a spouse or dependent child that is totally independent of his or her relationship to you.

Source	Date(s)	Point of Departure—Destination—Point of Return	Lodging? (Y/N)	Food? (Y/N)	Was a Family Member Included? (Y/N)	Any time not at sponsor's expense
Examples Chicago Chamber of Commerce	Mar 2	Wash , D C —Chicago—Wash , D C	N	N	N	N
Roycroft Corporation	Aug 6–13	Wash , D.C.—Los Angeles—Cleveland	Y	Y	Y	4 Days
Aspen Institute	March 7-9	Wash, D.C. to Hershey, Pennsylvania	Y	Y	Y	N
Jewish United Fund of Metro-Politan Chicago	August 13-20	Chicago, Il. to Telaviv, Israel to Jerusaleum	Y	Y	Y	N

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SCHEDULE VIII — POSITIONS

Report all positions, compensated or uncompensated, held during the current calendar year as an officer, director, trustee of an organization, partner, proprietor, representative, employee, or consultant of any corporation, firm, partnership, or other business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States

Exclude: Positions held in any religious, social, fraternal, or political entities; positions solely of an honorary nature; and positions listed on Schedule I.

Position	Name of Organization
Commissioner	Cook County Board of Commissioners
Board Member	Prevention Partnership
Board Member	Streetwise Newspaper
Staff Member	Loss Prevention

SCHEDULE IX — AGREEMENTS

Identify the date, parties to, and general terms of any agreement or arrangement with respect to: future employment, a leave of absence during the period of government service, continuation or deferral of payments by a former or current employer other than the U.S. Government; or continuing participation in an employee welfare or benefit plan maintained by a former employer.

Date	Parties To	Terms of Agreement

GPO 1998 46-260 (mac)

Use additional sheets if more space is required.

DANNY K. DAVIS
7TH DISTRICT, ILLINOIS
COMMITTEE ON
GOVERNMENT REFORM AND OVERSIGHT
SUBCOMMITTEE ON POSTAL SERVICE
SUBCOMMITTEE ON GOVERNMENT
MANAGEMENT, INFORMATION, AND TECHNOLOGY
COMMITTEE ON SMALL BUSINESS
SUBCOMMITTEE ON EMPOWERMENT
SUBCOMMITTEE ON TAX, FINANCE AND EXPORTS

98 JUN -4 PM 3:35

HAND DELIVERED

DISTRICT OFFICE
3333 WEST ARTHINGTON STREET
SUITE 130
CHICAGO, ILLINOIS 60624
(773) 533-7520

WASHINGTON OFFICE
ROOM 1218
LONGWORTH HOUSE OFFICE BUILDING
WASHINGTON, DC 20515
(202) 225-5006

Congress of the United States

House of Representatives

Washington, DC 20515–1307

June 3, 1998

Robin Carle
Office of the Clerk
U.S. House of Representatives
H154 The Capitol
Washington, DC 20515

HC ✓ (2)

Re: Amendment
U. S. Rep. Danny K. Davis
1997 Financial Disclosure Statement
Filed 5-14-98

Please accept this communique as an amendment to my 1997 Financial Disclosure Statement, filed 5-14-98.

The amendment is for page 4 to indicate assets solely held by and technically belonging to my wife, Vera G. Davis. Designation was not made on disclosure form.

Thank you very much.

Sincerely,

Danny K. Davis
Member of Congress

PRINTED ON RECYCLED PAPER

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1997

Form A
For use by Members, officers, and employees

98 MAY 14 PM 2:10

OFFICE OF THE CLERK
U.S. HOUSE OF REPRESENTATIVES

Jim Davis
(Full Name)

327 Cannon House Office Building
(Mailing Address)

Washington DC 20515

Daytime Telephone
(202) 225-3376

HAND DELIVERED (5)

(Office Use Only)

Filer Status	[X]	Member of the U.S. House of Representatives	State: FL District: 11	[ ]	Officer or Employee — Employing Office
Report Type	[X]	Annual (May 15)	[ ] Amendment	[ ]	Termination — Termination Date

A $200 penalty shall be assessed against anyone who files more than 30 days late.

PRELIMINARY INFORMATION -- ANSWER EACH OF THESE QUESTIONS

I. Did you or your spouse have "earned" income (e.g., salaries or fees) of $200 or more from any source in the reporting period?
If yes, complete and attach Schedule I — Yes [X] No [ ]

II. Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period?
If yes, complete and attach Schedule II — Yes [ ] No [X]

III. Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period?
If yes, complete and attach Schedule III. — Yes [X] No [ ]

IV. Did you, your spouse, or dependent child purchase, sell or exchange any reportable asset worth more than $1,000 in the reporting period?
If yes, complete and attach Schedule IV. — Yes [ ] No [X]

V. Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period?
If yes, complete and attach Schedule V. — Yes [ ] No [X]

VI. Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $250 and not otherwise exempt)?
If yes, complete and attach Schedule VI — Yes [ ] No [X]

VII. Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $250 from one source)?
If yes, complete and attach Schedule VII. — Yes [X] No [ ]

VIII. Did you hold any reportable positions on or before the date of filing in the current calendar year?
If yes, complete and attach Schedule VIII. — Yes [ ] No [X]

IX. Did you have any reportable agreement or arrangement with an outside entity?
If yes, complete and attach Schedule IX. — Yes [X] No [ ]

Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION -- ANSWER EACH OF THESE QUESTIONS

TRUSTS: Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child? (See Instructions, pages 10-11.) — Yes [ ] No [X]

EXEMPTION: Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption? (See Instructions, page 11.) — Yes [ ] No [X]

CERTIFICATION -- THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended. The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct or its designee. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil penalties and criminal sanctions (See 5 U.S.C. app. 4, 104 and 18 U.S.C. 1001).

SIGNATURE OF REPORTING INDIVIDUAL: Jim Davis

DATE (Month Day/Year): May 14, 1998

SCHEDULE I -- EARNED INCOME

List the source, type, and amount of earned income from any source (other than the filer's current employment by the U.S. Government) totalling $200 or more during the preceding calendar year. For a spouse, list the source and amount of any honoraria; list only the source for other spouse earned income exceeding $1,000. For further information, see Instructions, pages 12-13.

	Source	Type	Amount
Examples	Keene State	Approved Teaching Fee	$10,000
	State of Maryland	Legislative Pension	$9,000
	Civil War Roundtable (Oct. 2nd)	Spouse Speech	$1,000
	Ontario County Board of Education	Spouse Salary	NA
	Bush Ross Gardner Warren & Rudy, P.A.	Salary	$3,300.00
	Price Waterhouse LLP	Spouse Salary	NA

For payments to charity in lieu of honoraria, use Schedule II.

SCHEDULE III -- ASSETS AND "UNEARNED" INCOME

	BLOCK A **Asset and/or Income Source** Identify (a) each asset held for investment or production of income with a fair market value exceeding $1,000 at the end of the reporting year, and (b) any other asset or source of income which generated more than $200 in "unearned" income during the year. For rental property or land, provide an address. Provide full names of any mutual funds. For an IRA or retirement plan that is *self-directed,* list the underlying assets worth more than $1,000. For an IRA or retirement plan that is *not* self-directed, name the institution holding the account. **Exclude:** Your personal residence(s) (unless there is rental income); any debt owed to you by your spouse, or by your or your spouse's child, parent, or sibling; any deposits totalling $5,000 or less in personal savings accounts; any financial interests in or income derived from U.S. Government retirement programs. If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC) or is jointly held (JT), in the optional column on the far left. For further information, see Instructions, pages 14-20	BLOCK B **Value of Asset** at close of reporting year If you use a valuation method other than fair market value, please specify the method used. If an asset was sold and is included only because it generated income, the value should be "None."	BLOCK C **Type of Income** If other than one of the listed categories, specify the type of income by writing a brief description in this block	BLOCK D **Amount of Income** For IRA's and retirement plans that are *not* self-directed, you may write in "NA" for income	BLOCK E **Transaction** Indicate if asset was purchased(P), sold(S), or exchanged(E) in reporting year
SP DC *Examples* JT	SP SP	Mega Corp. Stock 123 Main St., Dover, Del 1st Bank of Paducah, KY accounts	$15,001 - $50,000 $250,001 - $500,000 $50,001 - $100,000	Dividends Rent Interest	$201 - $1,000 $1,001 - $2,500 $5,001 - $15,000	P
	Bush Ross Gardner Warren & Rudy, P.A. Benefit & Profit Sharing Plan	$15,001 - $50,000	Benefit & Profit Sharing Plan	None	NA
	Accounts Receivable- Bush Ross Gardner Warren & Rudy, P.A.	$15,001 - $50,000	NA	None	NA
	Savings Account- Bank of Tampa	None	Interest	$201 - $1,000	NA
DC	(2) Certificates- Treasury Securities	$1,001 - $15,000	NA	None	NA

SCHEDULE VII -- TRAVEL PAYMENTS AND REIMBURSEMENTS

Identify the source and list travel itinerary, dates, and nature of expenses provided for travel and travel-related expenses totalling more than $250 received by you, your spouse, or a dependent child during the reporting period. Indicate whether a family member accompanied the traveler at the sponsor's expense, and the amount of time, if any, that was not at the sponsor's expense. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor.
Exclude: Travel-related expenses provided by federal, state and local governments, or by a foreign government required to be separately reported under the Foreign Gifts and Decorations Act (5 U.S.C. 7342); travel paid for by a Federal political committee; travel provided to a spouse or dependent child that is totally independent of his or her relationship to you. For further information, see instructions, pages 24-26.

	Source	Date(s)	Point of Departure--Destination--Point of Return	Lodging? (Y/N)	Food? (Y/N)	Was a Family Member Included? (Y/N)	Any time not at sponsor's expense
Examples	Chicago Chamber of Commerce	Mar 2	Wash., D.C.-Chicago-Wash., D.C.	N	N	N	N
	Mega Corporation	Aug 6-13	Wash., D.C.-Los Angeles-Cleveland	Y	Y	Y	4 Days
	Florida Chamber of Commerce	February 13-14	Wash., D.C. - Orlando, FL	Y	Y	N	N

SCHEDULE IX -- AGREEMENTS

Identify the date, parties to, and general terms of any agreement or arrangement with respect to future employment, a leave of absence during the period of government service, continuation or deferral of payments by a former or current employer other than the U.S. Government, or continuing participation in an employee welfare or benefit plan maintained by a former employer. For further information, see Instructions, pages 26-27.

Date	Parties To	Terms of Agreement
12-94	Employment agreement between Bush Ross Gardner Warren & Rudy, P A	Allows for the right to receive payments collected by the firm for legal services provided by the Congressman as an attorney prior to election to Congress in November of 1996

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1997

FORM A
For use by Members, officers, and employees

98 MAY 15 PM 2:07

THOMAS M DAVIS III
(Full Name)

3304 JUNIPER WAY FALLS CHURCH, VIRGINIA 22042
(Mailing Address)

Daytime Telephone 202-225-1492

HAND DELIVERED (10)
HC
(Office Use Only)

Filer Status	☑ Member of the U.S. House of Representatives	State: VIRGINIA District: 11	☐ Officer or Employee	Employing Office
Report Type	☑ Annual (May 15)	☐ Amendment	☐ Termination	Termination Date

A *$200 penalty* shall be assessed against anyone who files more than 30 days late.

PRELIMINARY INFORMATION — ANSWER EACH OF THESE QUESTIONS

I. Did you or your spouse have "earned" income (e.g., salaries or fees) of $200 or more from any source in the reporting period?
If yes, complete and attach Schedule I — Yes ☑ No ☐

II. Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period?
If yes, complete and attach Schedule II. — Yes ☑ No ☐

III. Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period?
If yes, complete and attach Schedule III — Yes ☑ No ☐

IV. Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset worth more than $1,000 in the reporting period?
If yes, complete and attach Schedule IV. — Yes ☐ No ☑

V. Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period?
If yes, complete and attach Schedule V. — Yes ☑ No ☐

VI. Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $250 and not otherwise exempt)?
If yes, complete and attach Schedule VI. — Yes ☐ No ☑

VII. Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $250 from one source)?
If yes, complete and attach Schedule VII. — Yes ☑ No ☐

VIII. Did you hold any reportable positions on or before the date of filing in the current calendar year?
If yes, complete and attach Schedule VIII. — Yes ☐ No ☑

IX. Did you have any reportable agreement or arrangement with an outside entity?
If yes, complete and attach Schedule IX. — Yes ☐ No ☑

Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION — ANSWER EACH OF THESE QUESTIONS

TRUSTS—Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child? — Yes ☐ No ☑

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SIGNATURE OF REPORTING INDIVIDUAL: Thomas M. Davis

DATE (Month/Day/Year): MAY 14, 1998

Name T. DAVIS	Page 2 of 10

SCHEDULE I — EARNED INCOME

List the source, type, and amount of earned income from any source (other than the filer's current employment by the U.S. Government) totalling $200 or more during the preceding calendar year. For a spouse, list the source and amount of any honoraria; list only the source for other spouse earned income exceeding $1,000

	Source	Type	Amount
Examples	Keene State	Approved Teaching Fee	$6,000
	State of Maryland	Legislative Pension	$9,000
	Civil War Roundtable (Oct 2nd)	Spouse Speech	$1,000
	Ontario County Board of Education	Spouse Salary	NA
	DAVIS, HALL AND HAFNER	SPOUSE SALARY	NA

For payments to charity in lieu of honoraria, use Schedule II.

SCHEDULE II — PAYMENTS IN LIEU OF HONORARIA MADE TO CHARITY

List the source, activity (i e , speech, appearance, or article), date, and amount of any payment made by the sponsor of an event to a charitable organization in lieu of an honorarium A separate confidential list of charities receiving such payments must be filed directly with the Committee on Standards of Official Conduct An envelope for transmitting the list is included in each Member's filing package

Source	Activity	Date	Amount
Examples Association of American Associations, Wash D.C. XYZ Magazine	Speech Article	Feb 2, 1997 Aug 13, 1997	$2,000 $500
AMS CORPORATION	SPEECH	MARCH 3, 4, 1997	$2,500

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Name T. DAVIS | Page 4 of 18

SCHEDULE III — ASSETS AND "UNEARNED" INCOME

BLOCK A — Asset and/or Income Source

Identify (a) each asset held for investment or production of income with a fair market value exceeding $1,000 at the end of the reporting year, and (b) any other asset or source of income which generated more than $200 in "unearned" income during the year. For rental property or land, provide an address. Provide full names of any mutual funds. For an IRA or retirement plan that is *self-directed*, list the underlying assets worth more than $1,000. For an IRA or retirement plan that is not selfdirected, name the institution holding the account.

Exclude: Your personal residence(s) (unless there is rental income), any debt owed to you by your spouse, or by your or your spouse's child, parent, or sibling, any deposits totalling $5,000 or less in personal savings accounts, any financial interests in or income derived from U.S. Government retirement programs.

If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC) or is jointly held (JT), in the optional column on the far left.

BLOCK B — Value of Asset

at close of reporting year. If you use a valuation method other than fair market value, please specify the method used. If an asset was sold and is included only because it generated income, the value should be "None."

BLOCK C — Type of Income

BLOCK D — Amount of Income

For IRA's and retirement plans that are *not* self-directed, you may write in "NA" for income.

BLOCK E — Transaction

Indicate if asset was purchased (P), sold (S), or exchanged (E) in reporting year.

	BLOCK A	A None	B $1 – $1,000	C $1,001 – $15,000	$15,001 – $50,000	E $50,001 – $100,000	F $100,001 – $250,000	G $250,001 – $500,000	H $500,001 – $1,000,000	I $1,000,001 – $5,000,000	J $5,000,001 – $25,000,000	K $25,000,001 – $50,000,000	L Over $50,000,000	DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Type of Income (Specify. For Example, Partnership Income or Farm Income)	I None	II $1 – $200	III $201 – $1,000	IV $1,001 – $2,500	V $2,501 – $5,000	VI $5,001 – $15,000	VII $15,001 – $50,000	VIII $50,001 – $100,000	IX $100,001 – $1,000,000	X $1,000,001 – $5,000,000	XI Over $5,000,000	BLOCK E
SP	SP Mega Corp Stock					X								X																	P
DC	*Examples* Simon & Schuster		Indefinite																	Royalties											
JT	1st Bank of Paducah, KY accounts						X									X									X						
	VIRGINIA STATE PUBLIC AUTHORITY BONDS.				X											X								X							
	PRC · INC · ESOP						X							X											X						

For additional assets and unearned income, use next page.

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SCHEDULE III — ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Name T. DAVIS

SP. DC. JT	BLOCK A Asset and/or Income Source	BLOCK B Year-End Value of Asset												BLOCK C Type of Income							BLOCK D Amount of Income										BLOCK E Transaction
		A None	B $1 - $1,000	C $1,001 - $15,000	D $15,001 - $50,000	E $50,001 - $100,000	F $100,001 - $250,000	G $250,001 - $500,000	H $500,001 - $1,000,000	I $1,000,001 - $5,000,000	J $5,000,001 - $25,000,000	K $25,000,001 - $50,000,000	L Over $50,000,000	DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Type of Income (Specify)	I None	II $1 - $200	III $201 - $1,000	IV $1,001 - $2,500	V $2,501 - $5,000	VI $5,001 - $15,000	VII $15,001 - $50,000	VIII $50,001 - $100,000	IX $100,001 - $1,000,000	X $1,000,001 - $5,000,000	XI Over $5,000,000	P, S, E
	FAIRFAX COUNTY PUBLIC IMPROVEMENT FUNDS				X											X									X						
	CHARLES SCHWAB TAX EXEMPT MONEY FUND						X									X								X							
	BLACK AND DECKER			X										X										X							
	SAVINGS ACCT. FIRST UNION BANK - FAIRFAX VIRGINIA				X											X								X							
	RENTAL PROPERTY 4559 KING EDWARD CT. ANNANDALE, VIRGINIA						X								X						X										
	401 K PLAN - PRC INC						X									X									X						
	401 K PLAN, DEFERRED COMPENSATION - FAIRFAX COUNTY, VA						X									X									X						

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SCHEDULE III — ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Name: T. DAVIS | Page 6 of 10

BLOCK A: Asset and/or Income Source	BLOCK B: Year-End Value of Asset												BLOCK C: Type of Income							BLOCK D: Amount of Income											BLOCK E: Transaction
SP DC JT	A None	B $1 – $1,000	C $1,001 – $15,000	D $15,001 – $50,000	E $50,001 – $100,000	F $100,001 – $250,000	G $250,001 – $500,000	H $500,001 – $1,000,000	I $1,000,001 – $5,000,000	J $5,000,001 – $25,000,000	K $25,000,001 – $50,000,000	L Over $50,000,000	DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Type of Income (Specify)	I None	II $1 – $200	III $201 – $1,000	IV $1,001 – $2,500	V $2,501 – $5,000	VI $5,001 – $15,000	VII $15,001 – $50,000	VIII $50,001 – $100,000	IX $100,001 – $1,000,000	X $1,000,001 – $5,000,000	XI Over $5,000,000	P, S, E
OCEANA PROPERTY PARTNERSHIP - VIRGINIA BEACH, VA				X										X						X										

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SCHEDULE IV — TRANSACTIONS

Name T. DAVIS | Page 7 of 10

Report any purchase, sale, or exchange by you, your spouse, or dependent child during the reporting year of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child, or the purchase or sale of your personal residence, unless it is rented out.

SP, DC, JT	Asset	Type of Transaction: PURCHASE	SALE	EXCHANGE	Date (MO/DAY/YR)	Amount of Transaction: B $1,001–$15,000	C $15,001–$50,000	D $50,001–$100,000	E $100,001–$250,000	F $250,001–$500,000	G $500,001–$1,000,000	H $1,000,001–$5,000,000	I $5,000,001–$25,000,000	J $25,000,001–$50,000,000	K Over $50,000,000
SP	*Example* Mega Corporation Common Stock	X			10-12-97		X								
	N A														

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SCHEDULE V — LIABILITIES

Report liabilities of over $10,000 owed to any one creditor ***at any time*** during the reporting period by you, your spouse, or dependent child. Mark the highest amount owed during the year. **Exclude:** Any mortgage on your personal residence (unless it is rented out), loans secured by automobiles, household furniture, or appliances, and liabilities owed to a spouse, or the child, parent, or sibling of you or your spouse. Report ***revolving charge accounts*** only if the balance at the end of the reporting period exceeded $10,000.

SP, DC, JT	Creditor	Type of Liability	Amount of Liability									
			B $10,001–$15,000	C $15,001–$50,000	D $50,001–$100,000	E $100,001–$250,000	F $250,001–$500,000	G $500,001–$1,000,000	H $1,000,001–$5,000,000	I $5,000,001–$25,000,000	J $25,000,001–$50,000,000	K Over $50,000,000
	Example First Bank of Wilmington, Delaware	Mortgage on 123 Main St., Dover, Del				X						
	FIRST VIRGINIA BANK - FALLS CHURCH, VIRGINIA	MORTGAGE - 4559 KING EDWARD COURT ANNANDALE, VIRGINIA				X						

SCHEDULE VI — GIFTS

Report the source, a brief description, and the value of all gifts totalling more than $250 received by you, your spouse, or a dependent child from any source during the year.

Exclude: Gifts from relatives, gifts of personal hospitality of an individual, local meals, and gifts to a spouse or dependent child that are totally independent of his or her relationship to you. Gifts with a value of $100 or less need not be added towards the $250 disclosure threshold.

Note: The gift rule (House Rule 51) prohibits gifts except as specifically provided in the rule.

Source	Description	Value
Example Mr. Joseph H. Smith, Anytown, Anystate	Silver Platter (determination on personal friendship received from Committee on Standards)	$270
N A		

Use additional sheets if more space is required.

Name	T. DAVIS	Page 9 of 10

SCHEDULE VII —TRAVEL PAYMENTS AND REIMBURSEMENTS

Identify the source and list travel itinerary, dates, and nature of expenses provided for travel and travel-related expenses totalling more than $250 received by you, your spouse, or a dependent child during the reporting period. Indicate whether a family member accompanied the traveler at the sponsor's expense, and the amount of time, if any, that was not at the sponsor's expense. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor.

Exclude: Travel-related expenses provided by federal, state, and local governments, or by a foreign government required to be separately reported under the Foreign Gifts and Decorations Act (5 U.S.C. § 7342); travel paid for by a Federal political committee; travel provided to a spouse or dependent child that is totally independent of his or her relationship to you

Source	Date(s)	Point of Departure—Destination—Point of Return	Lodging? (Y/N)	Food? (Y/N)	Was a Family Member Included? (Y/N)	Any time not at sponsor's expense
Examples: Chicago Chamber of Commerce	Mar 2	Wash., D.C.—Chicago—Wash. D.C.	N	N	N	N
Roycroft Corporation	Aug 6–13	Wash., D.C.—Los Angeles—Cleveland	Y	Y	Y	4 Days
AMS CORPORATION	MAR. 3,4	WASH DC · SAN FRANCISCO · WASH DC.	Y	Y	N	N
AMERICAN BAR ASSOCIATION	AUG 2-4	WASH DC - SAN FRANCISCO · WASH DC.	Y	Y	Y	N
ASPEN INSTITUTE	FEB 14-17	WASH DC · PALM BEACH, FLA · WASH DC	Y	Y	Y	N
BI · PARTISON CONGRESS. RETREAT	MAR 7-9	WASH, DC · HERSHEY, PA · WASH, DC	Y	Y	Y	N

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SCHEDULE VIII — POSITIONS

Report all positions, compensated or uncompensated, held during the current calendar year as an officer, director, trustee of an organization, partner, proprietor, representative, employee, or consultant of any corporation, firm, partnership, or other business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States

Exclude: Positions held in any religious, social, fraternal, or political entities, positions solely of an honorary nature; and positions listed on Schedule I.

Position	Name of Organization
NA	

SCHEDULE IX — AGREEMENTS

Identify the date, parties to, and general terms of any agreement or arrangement with respect to: future employment, a leave of absence during the period of government service, continuation or deferral of payments by a former or current employer other than the U.S. Government; or continuing participation in an employee welfare or benefit plan maintained by a former employer.

Date	Parties To	Terms of Agreement
	NA	

GPO: 1998 46–260 (mac)

Use additional sheets if more space is required.

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98 MAY 14 PM 2:33

HOUSE OF REPRESENTATIVES

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1997

Form A
For use by Members, officers, and employees

John Nathan Deal
(Full Name)

8805 Skitts Mountain Rd
(Mailing Address)

Clermont GA 30527

Daytime Telephone
(202) 225-5211

14C HAND DELIVERED (10)
(Office Use Only)

Filer Status: [X] Member of the U S House of Representatives — State GA, District 09 — [ ] Officer or Employee — Employing Office

Report Type: [X] Annual (May 15) — [ ] Amendment — [ ] Termination — Termination Date

A $200 penalty shall be assessed against anyone who files more than 30 days late.

PRELIMINARY INFORMATION -- ANSWER EACH OF THESE QUESTIONS

I. Did you or your spouse have "earned" income (e.g., salaries or fees) of $200 or more from any source in the reporting period? **If yes, complete and attach Schedule I.** — Yes [X] No [ ]

II. Did any individual or organization make a donation to charity in lieu of paying you for a speech, apppearance, or article in the reporting period? **If yes, complete and attach Schedule II.** — Yes [ ] No [X]

III. Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? **If yes, complete and attach Schedule III.** — Yes [X] No [ ]

IV. Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset worth more than $1,000 in the reporting period? **If yes, complete and attach Schedule IV.** — Yes [X] No [ ]

V. Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? **If yes, complete and attach Schedule V.** — Yes [X] No [ ]

VI. Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $250 and not otherwise exempt)? **If yes, complete and attach Schedule VI.** — Yes [ ] No [X]

VII. Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $250 from one source)? **If yes, complete and attach Schedule VII.** — Yes [X] No [ ]

VIII. Did you hold any reportable positions on or before the date of filing in the current calendar year? **If yes, complete and attach Schedule VIII.** — Yes [X] No [ ]

IX. Did you have any reportable agreement or arrangement with an outside entity? **If yes, complete and attach Schedule IX.** — Yes [ ] No [X]

Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION -- ANSWER EACH OF THESE QUESTIONS

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SIGNATURE OF REPORTING INDIVIDUAL: John Nathan Deal

DATE (Month/Day/Year): May 14, 1998

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SCHEDULE I -- EARNED INCOME

List the source, type, and amount of earned income from any source (other than the filer's current employment by the U.S. Government) totalling $200 or more during the preceding calendar year. For a spouse, list the source and amount of any honoraria; list only the source for other spouse earned income exceeding $1,000. For further information, see Instructions, pages 12-13.

	Source	Type	Amount
	Keene State	Approved Teaching Fee	$10,000
	State of Maryland	Legislative Pension	$9,000
Examples	Civil War Roundtable (Oct. 2nd)	Spouse Speech	$1,000
	Ontario County Board of Education	Spouse Salary	NA
	Hall County Board of Education, Gainesville, GA	Spouse Salary	NA

For payments to charity in lieu of honoraria, use Schedule II.

SCHEDULE II -- PAYMENTS IN LIEU OF HONORARIA MADE TO CHARITY

List the source, activity (i.e., speech, appearance, or article), date, and amount of any payment made by the sponsor of an event to a charitable organization in lieu of an honorarium. A separate confidential list of charities receiving such payments must be filed directly with the Committe on Standards of Official Conduct. An envelope for transmitting the list is included in each Member's filing package. For further information, see Instructions, pages 13-14.

	Source	Activity	Date	Amount
Examples	Association of American Associations, Wash., D.C.	Speech	Feb. 2, 1994	$2,000
	XYZ Magazine	Article	Aug. 13, 1994	$500

SCHEDULE III -- ASSETS AND "UNEARNED" INCOME

BLOCK A **Asset and/or Income Source** Identify (a) each asset held for investment or production of income with a fair market value exceeding $1,000 at the end of the reporting year, and (b) any other asset or source of income which generated more than $200 in "unearned" income during the year. For rental property or land, provide an address. Provide full names of any mutual funds. For an IRA or retirement plan that is *self-directed*, list the underlying assets worth more than $1,000. For an IRA or retirement plan that is *not* self-directed, name the institution holding the account. **Exclude**: Your personal residence(s) (unless there is rental income), any debt owed to you by your spouse, or by your or your spouse's child, parent, or sibling, any deposits totalling $5,000 or less in personal savings accounts, any financial interests in or income derived from U.S. Government retirement programs. If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC) or is jointly held (JT) in the optional column on the far left. For further information, see instructions, pages 14-20			BLOCK B **Value of Asset** at close of reporting year If you use a valuation method other than fair market value, please specify the method used If an asset was sold and is included only because it generated income, the value should be "None."	BLOCK C **Type of Income** If other than one of the listed categories, specify the type of income by writing a brief description in this block	BLOCK D **Amount of Income** For IRA's and retirement plans that are *not* self-directed, you may write in "NA" for income	BLOCK E **Transaction** Indicate if asset was purchased(P), sold(S), or exchanged(E) in reporting year
SP DC JT	*Examples*	SP	Mega Corp. Stock 123 Main St., Dover, Del. 1st Bank of Paducah, KY accounts	$15,001 - $50,000 $250,001 - $500,000 $50,001 - $100,000	Dividends Rent Interest	$201 - $1,000 $1,001 - $2,500 $5,001 - $15,000	P
	Note Payable-Charles & Norma Matthews-1/2 interest			None	Interest and Capital Gains	$15,001 - $50,000	P
	212 Green St -Gainesville,GA- 1/2 interest			$100,001 - $250,000	Rent	$15,001 - $50,000	
JT	8811 SKitts Mountain Rd -Rental House, Clermont,GA			$15,001 - $50,000	Rent	$2,501 - $5,000	
	IRA-Regions Bank, Gainesville, GA			$1,001 - $15,000	Interest	NA	
SP	IRA-Regions Bank, Gainesville, GA			$1,001 - $15,000	Interest	NA	
	IRA-Community Bank & Trust			$1,001 - $15,000	Dividends	NA	

SCHEDULE III -- ASSETS AND "UNEARNED" INCOME

	IRA-A G Edwards-Mutual Funds	$100,001 - $250,000	Dividends	NA	
SP	IRA-A G Edwards- Mutual Funds	$15,001 - $50,000	Dividends	NA	
JT	Putnam New Op Fund	$1,001 - $15,000	Dividends	$1,001 - $2,500	
JT	Wash Mutual Investors Fund, Inc	$1,001 - $15,000	Dividends	$1,001 - $2,500	
	Wachovia Corp - Stock	$1,001 - $15,000	Dividends	$201 - $1,000	
	Gainesville Bank & Trust-Stock	$1,001 - $15,000	Dividends	$201 - $1,000	
	Regions Bank- Stock	$1,001 - $15,000	Dividends	$201 - $1,000	
	North Ga Farm Credit- Stock	$1,001 - $15,000	Capital Gains and Dividends	$2,501 - $5,000	
	Regions Bank- Checking Account	$1,001 - $15,000	No interest	None	
	Gainesville Bank & Trust-Checking Acct	$1,001 - $15,000	No interest	None	
	Congressional Federal Credit Union	$1 - $1,000	Interest	$1 - $200	
	Recovery Services, Inc - Stock	$50,001 - $100,000	Dividends	None	
	Thrift Savings Plan	$50,001 - $100,000	Dividends and Interest	$5,001 - $15,000	
	1/2 interest 29.574 acres-Gainesville,GA (50% of value and income reported here)	$250,001 - $500,000	Rent	$15,001 - $50,000	
	1/2 interest Freightliner Truck	$15,001 - $50,000	Rent	$5,001 - $15,000	

SCHEDULE IV -- TRANSACTIONS

Report any purchase, sale, or exchange by you, your spouse, or dependent child during the reporting year of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child, or the purchase or sale of your personal residence, unless it is rented out. For further information, see Instructions, pages 20-21.

SP,DC,JT	Asset	Type of Transaction	Date	Amount of Transaction
	Example Mega Corporation Common Stock	Purchase	10/12/94	$15,001 - $50,000
	Note Receivable-Charles and Norma Matthews- 1/2 interest	Paid Off	5/97	$15,001 - $50,000

SCHEDULE V -- LIABILITIES

Report liabilities of over $10,000 owed to any one creditor ***at any time*** during the reporting period by you, your spouse, or dependent child. Mark the highest amount owed during the year.
Exclude: Any mortgage on your personal residence (unless it is rented out), loans secured by automobiles, household furniture, or appliances, and liabilities owed to a spouse, or the child, parent, or sibling of you or your spouse. Report ***revolving charge accounts*** only if the balance at the end of the reporting period exceeded $10,000. For further information, see Instructions, pages 21-22.

SP,DC,JT	Creditor	Type of Liability	Amount of Liability
	Example First Bank of Wilmington, Delaware	Mortgage on 123 Main St., Dover, Del.	$100,001 - $250,000
	Gainesville Bank & Trust-Gainesville,GA (1/2 amt. reported)	Mortgage on 20.77 acres-1602 Athens Hwy	$100,001 - $250,000
	Gainesville Bank & Trust-Gainesville,GA (1/2 amt. reported)	Endorser-Note of Recovery Services	$15,001 - $50,000
	Gainesville Bank & Trust-Gainesville,GA (1/2 amt. reported)	Note for Truck and Tractor	$15,001 - $50,000
	Charles Thurman (1/2 amt. reported)	Mortgage on 8.804 acres-1602 Athens Hwy	$15,001 - $50,000
	Gainesville Bank & Trust	Mortgage on 88 acres- Skitts Mountain Rd	$15,001 - $50,000

SCHEDULE VI -- GIFTS

Report the source, a brief description, and the value of all gifts totalling more than $250 received by you, your spouse, or a dependent child from any source during the year

Exclude: Gifts from relatives, gifts of personal hospitality of an individual, local meals, and gifts to a spouse or dependent child that are totally independent of his or her relationship to you Gifts with a value of $100 or less need not be added towards the $250 disclosure threshold

Note: The gift rule (House Rule 52 in the 104th Congress, renumbered as House Rule 51 of the 105th Congress) prohibits gifts except as specifically provided in the rule

For further information, see Instructions, pages 22-24

	Source	Description	Value
Example	Mr. Joseph H. Smith, Anytown, Anystate	Silver Platter (waiver received from Committee on Standards)	$270

SCHEDULE VII -- TRAVEL PAYMENTS AND REIMBURSEMENTS

Identify the source and list travel itinerary, dates, and nature of expenses provided for travel and travel-related expenses totalling more than $250 received by you, your spouse, or a dependent child during the reporting period. Indicate whether a family member accompanied the traveler at the sponsor's expense, and the amount of time, if any, that was not at the sponsor's expense. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor.

Exclude: Travel-related expenses provided by federal, state and local governments, or by a foreign government required to be separately reported under the Foreign Gifts and Decorations Act (5 U.S.C. 7342), travel paid for by a Federal political committee, travel provided to a spouse or dependent child that is totally independent of his or her relationship to you. For further information, see Instructions, pages 24-26.

Source	Date(s)	Point of Departure--Destination--Point of Return	Lodging? (Y/N)	Food? (Y/N)	Was a Family Member Included? (Y/N)	Any time not at sponsor's expense
Examples Chicago Chamber of Commerce	Mar 2	Wash., D.C.-Chicago-Wash., D.C.	N	N	N	N
Mega Corporation	Aug 6-13	Wash., D.C.-Los Angeles-Cleveland	Y	Y	Y	4 Days
Hall County United Way	September 4-5	Wash.,D.C.-Gainesville,GA-Wash.,D.C.	N	Y	N	N
Medical Association of Georgia	August 8-10	Gainesville,GA-Sea Island, GA	Y	Y	Y	N

SCHEDULE VIII -- POSITIONS

Report all positions compensated or uncompensated, held during the current calendar year as an officer, director, trustee of an organization, partner, propretor, representative, employee, or consultant of any corporation, firm, partnership, or other business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States. For further information, see Instructions, page 26.

Exclude: Positions held in any religious, social, fraternal, or political entities, positions solely of an honorary nature, and positions listed on Schedule I.

Position	Organization
Partner	Deal & Jarrard- Real Estate Partnership
Secretary/Treasurer	Recovery Services, Inc
Partner	C & D Enterprises- Real Estate Partnership

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1406 Longworth House Office Building
Washington, D.C. 20515-1009
phone: (202) 225-5211
fax: (202) 225-8272
http://www.house.gov/deal

Nathan Deal
Congress of the United States
9th District of Georgia

Committee On Commerce
Telecommunications, Trade and Consumer Protection
Finance and Hazardous Materials
Health and Environment

Committee On Education and the Workforce
Postsecondary Education, Training and Life-long Learning

June 10, 1998

Clerk of the House
B106 Canon House Office Building
Washington, DC 20515

(1) DJ MC

To the Clerk of the House,

I am sending this letter to amend the financial disclosure that I'm filing for the calendar year 1997. The changes that I want to be added are as follows

To be added on to Schedule IV- Transactions

1)JT(joint asset) Putnam New Op. Fund was purchased in March of 1997. The amount of the transaction is $1,001-$15,000

2)JT(joint asset) Wash. Mutual Investors Fund, Inc. was purchased in March of 1997. The amount of the transaction is $1,001-$15,000.

Respectfully,

Nathan Deal

Nathan Deal

Suite 108, The Hunt Tower
200 Main Street
Mailing address: P.O. Box 1015
Gainesville, Georgia 30503
phone: (770) 535-2592
fax: (770) 535-2765

Suite 108
415 E. Walnut Avenue
Dalton, Georgia 30721
phone: (706) 226-5320
fax: (706) 278-0840

Suite 102
108 W. Lafayette Square
LaFayette, Georgia 30728
phone: (706) 638-7042
fax: (706) 638-7049

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UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1997

FORM A
For use by Members, officers, and employees

Peter A. DeFazio
(Full Name)
2134 RHOB Wash D.C. 20515
(Mailing Address)
202 225 6416
Daytime Telephone

MC (Office Use Only) (9)

Filer Status
- [X] Member of the U.S. House of Representatives — State OR, District 4
- [ ] Officer or Employee — Employing Office

Report Type
- [X] Annual (May 15)
- [ ] Amendment
- [ ] Termination — Termination Date

A *$200 penalty* shall be assessed against anyone who files more than 30 days late.

PRELIMINARY INFORMATION — ANSWER EACH OF THESE QUESTIONS

I Did you or your spouse have "earned" income (e.g., salaries or fees) of $200 or more from any source in the reporting period? **If yes, complete and attach Schedule I.** Yes [X] No [ ]

II Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? **If yes, complete and attach Schedule II.** Yes [X] No [ ]

III Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? **If yes, complete and attach Schedule III.** Yes [X] No [ ]

IV Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset worth more than $1,000 in the reporting period? **If yes, complete and attach Schedule IV.** Yes [X] No [ ]

V Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? **If yes, complete and attach Schedule V.** Yes [ ] No [X]

VI Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $250 and not otherwise exempt)? **If yes, complete and attach Schedule VI.** Yes [ ] No [X]

VII Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $250 from one source)? **If yes, complete and attach Schedule VII.** Yes [X] No [ ]

VIII Did you hold any reportable positions on or before the date of filing in the current calendar year? **If yes, complete and attach Schedule VIII.** Yes [ ] No [X]

IX Did you have any reportable agreement or arrangement with an outside entity? **If yes, complete and attach Schedule IX** Yes [ ] No [X]

Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION — ANSWER EACH OF THESE QUESTIONS

TRUSTS—Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child? Yes [ ] No [X]

EXEMPTION—Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption? Yes [ ] No [X]

CERTIFICATION — THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended. The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct or its designee. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil penalties and criminal sanctions (*See* 5 U.S.C. app. 4, §104 and 18 U.S.C. §1001)

SIGNATURE OF REPORTING INDIVIDUAL [signature]

DATE (Month/Day/Year) 5/May/98

Name	DeFazio	Page 2 of 9

SCHEDULE I — EARNED INCOME

List the source, type, and amount of earned income from any source (other than the filer's current employment by the U.S. Government) totalling $200 or more during the preceding calendar year. For a spouse, list the source and amount of any honoraria; list only the source for other spouse earned income exceeding $1,000.

	Source	Type	Amount
Examples	Keene State	Approved Teaching Fee	$6,000
	State of Maryland	Legislative Pension	$9,000
	Civil War Roundtable (Oct. 2nd)	Spouse Speech	$1,000
	Ontario County Board of Education	Spouse Salary	NA
	U.S. GOVERNMENT	SELF SALARY	
	CITY OF EUGENE OREGON	SPOUSE SALARY	
	UNIVERSITY OF OREGON	SPOUSE SALARY	

For payments to charity in lieu of honoraria, use Schedule II.

Name	DeFazio	Page 3 of 9

SCHEDULE II — PAYMENTS IN LIEU OF HONORARIA MADE TO CHARITY

List the source, activity (i.e., speech, appearance, or article), date, and amount of any payment made by the sponsor of an event to a charitable organization in lieu of an honorarium. A separate confidential list of charities receiving such payments must be filed directly with the Committee on Standards of Official Conduct. An envelope for transmitting the list is included in each Member's filing package.

Source	Activity	Date	Amount
Examples Association of American Associations, Wash., D.C.	Speech	Feb. 2, 1997	$2,000
XYZ Magazine	Article	Aug. 13, 1997	$500
Inter Health Nutritionals Incorporated	Award	Sept. 27, 1997	$2,000
Kmart Family Foundation	Fundraiser/race	Sept 10, 1997	$500

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Name DeFazio | Page 4 of 9

SCHEDULE III — ASSETS AND "UNEARNED" INCOME

BLOCK A — Asset and/or Income Source

Identify (a) each asset held for investment or production of income with a fair market value exceeding $1,000 at the end of the reporting year, and (b) any other asset or source of income which generated more than $200 in "unearned" income during the year. For rental property or land, provide an address. Provide full names of any mutual funds. For an IRA or retirement plan that is *self-directed*, list the underlying assets worth more than $1,000. For an IRA or retirement plan that is not selfdirected, name the institution holding the account.

Exclude: Your personal residence(s) (unless there is rental income); any debt owed to you by your spouse, or by your or your spouse's child, parent, or sibling, any deposits totalling $5,000 or less in personal savings accounts; any financial interests in or income derived from U.S. Government retirement programs.

If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC) or is jointly held (JT), in the optional column on the far left.

BLOCK B — Value of Asset

at close of reporting year. If you use a valuation method other than fair market value, please specify the method used. If an asset was sold and is included only because it generated income, the value should be "None."

BLOCK C — Type of Income

BLOCK D — Amount of Income

For IRA's and retirement plans that are *not* self-directed, you may write in "NA" for income.

BLOCK E — Transaction

Indicate if asset was purchased (P), sold (S), or exchanged (E) in reporting year.

	BLOCK A		BLOCK B													BLOCK C						BLOCK D										BLOCK E
			A None	B $1 – $1,000	C $1,001 – $15,000	$15,001 – $50,000	E $50,001 – $100,000	F $100,001 – $250,000	G $250,001 – $500,000	H $500,001 – $1,000,000	I $1,000,001 – $5,000,000	J $5,000,001 – $25,000,000	K $25,000,001 – $50,000,000	L Over $50,000,000	DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Type of Income (Specify. For Example, Partnership Income or Farm Income)	I None	II $1 – $200	III $201 – $1,000	IV $1,001 – $2,500	V $2,501 – $5,000	VI $5,001 – $15,000	VII $15,001 – $50,000	VIII $50,001 – $100,000	IX $100,001 – $1,000,000	X $1,000,001 – $5,000,000	XI Over $5,000,000	P, S, E
SP, DC, JT	*Examples*	SP	Mega Corp. Stock				X								X																	P
			Simon & Schuster	Indefinite																	Royalties											
			1st Bank of Paducah, KY accounts					X									X									X						
Self	FERS Deferred Comp Acct							X																N/A								Monthly Contribution
SELF	IRA (Bidwell Co)																															
	Money Market			X													X					X										
	Price Equity Income				X													X						X								
	Crabbe Huson Special				X													X						X								

For additional assets and unearned income, use next page.

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SCHEDULE III — ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Name: DeFazio | Page 5 of 9

	BLOCK A	BLOCK B												BLOCK C						BLOCK D										BLOCK E
	Asset and/or Income Source	Year-End Value of Asset												Type of Income						Amount of Income										Transaction
SP, DC, JT		A None	B $1 – $1,000	C $1,001 – $15,000	D $15,001 – $50,000	E $50,001 – $100,000	F $100,001 – $250,000	G $250,001 – $500,000	H $500,001 – $1,000,000	I $1,000,001 – $5,000,000	J $5,000,001 – $25,000,000	K $25,000,001 – $50,000,000	L Over $50,000,000	DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Type of Income (Specify)	I None	II $1 – $200	III $201 – $1,000	IV $1,001 – $2,500	V $2,501 – $5,000	VI $5,001 – $15,000	VII $15,001 – $50,000	VIII $50,001 – $100,000	IX $100,001 – $1,000,000	X $1,000,001 – $5,000,000	XI Over $5,000,000	P, S, E
SELF	OAKMARK SMALL CAP FUND			X										X			X							X						
SELF	OAKMARK GOVT PORTFOLIO		X													X						X									
SELF	DOMINION RESOURCES			X										X			X						X								
SP	CONTRA FUND			X													X						X								P
SP	IRA		Detail Below																												
SP	VANGUARD WINDSOR			X												N/A															P
SP	T. ROWE PRICE EQUITY			X												N/A															P
BP	FIDELITY ASSETMGR GROWTH			X												N/A															P
SP	DEFERRED COMP		Detail Below																												
SP	VALIC					X										N/A							MONTHLY	CONTRIB							P
SP	PEBSCO				X											N/A							MONTHLY	CONTRIB							P

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SCHEDULE IV — TRANSACTIONS

Name: DeFazio | Page 6 of 9

Report any purchase, sale, or exchange by you, your spouse, or dependent child during the reporting year of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child, or the purchase or sale of your personal residence, unless it is rented out.

SP, DC, JT	Asset	Type of Transaction: PURCHASE	SALE	EXCHANGE	Date (MO/DAY/YR)	Amount of Transaction: B $1,001–$15,000	C $15,001–$50,000	D $50,001–$100,000	E $100,001–$250,000	F $250,001–$500,000	G $500,001–$1,000,000	H $1,000,001–$5,000,000	I $5,000,001–$25,000,000	J $25,000,001–$50,000,000	K Over $50,000,000
SP	*Example.* Mega Corporation Common Stock	X			10–12–97		X								
SELF	OAKMARK SMALL CAP FUND		X		1/22/97	X									
SPOUSE	BERGER 100		X		1/20/97	X									
SPOUSE	BERGER 100 (IRA)		X		1/20/97		X								
SPOUSE	VANGUARD WINDSOR II (IRA)	X			2/13/97	X									
SPOUSE	T ROWE PRICE EQUITY (IRA)	X			2/13/97	X									
SPOUSE	FIDELITY ASSET MGR (IRA)	X			2/13/97	X									
SPOUSE	CONTRA FUND (IRA)	X			2/13/97	X									

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Name DeFazio | Page 7 of 9

SCHEDULE V — LIABILITIES

Report liabilities of over $10,000 owed to any one creditor ***at any time*** during the reporting period by you, your spouse, or dependent child. Mark the highest amount owed during the year. **Exclude:** Any mortgage on your personal residence (unless it is rented out), loans secured by automobiles, household furniture, or appliances, and liabilities owed to a spouse, or the child, parent, or sibling of you or your spouse. Report ***revolving charge accounts*** only if the balance at the end of the reporting period exceeded $10,000.

SP, DC, JT	Creditor	Type of Liability	Amount of Liability									
			B $10,001–$15,000	C $15,001–$50,000	D $50,001–$100,000	E $100,001–$250,000	F $250,001–$500,000	G $500,001–$1,000,000	H $1,000,001–$5,000,000	I $5,000,001–$25,000,000	J $25,000,001–$50,000,000	K Over $50,000,000
Example	First Bank of Wilmington, Delaware	Mortgage on 123 Main St., Dover, Del				X						
JT	COUNTRYWIDE FUNDING	½ INTEREST MORTGAGE		X								
		53880 PINEGROVE Rd										
		LaPine OR										

SCHEDULE VI — GIFTS

Report the source, a brief description, and the value of all gifts totalling more than $250 received by you, your spouse, or a dependent child from any source during the year.

Exclude: Gifts from relatives, gifts of personal hospitality of an individual, local meals, and gifts to a spouse or dependent child that are totally independent of his or her relationship to you. Gifts with a value of $100 or less need not be added towards the $250 disclosure threshold.

Note: The gift rule (House Rule 51) prohibits gifts except as specifically provided in the rule.

Source	Description	Value
Example Mr. Joseph H. Smith, Anytown, Anystate	Silver Platter (determination on personal friendship received from Committee on Standards)	$270
NONE		

Use additional sheets if more space is required.

Name DeFazio | Page 8 of 9

SCHEDULE VII —TRAVEL PAYMENTS AND REIMBURSEMENTS

Identify the source and list travel itinerary, dates, and nature of expenses provided for travel and travel-related expenses totalling more than $250 received by you, your spouse, or a dependent child during the reporting period. Indicate whether a family member accompanied the traveler at the sponsor's expense, and the amount of time, if any, that was not at the sponsor's expense. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor.

Exclude: Travel-related expenses provided by federal, state, and local governments, or by a foreign government required to be separately reported under the Foreign Gifts and Decorations Act (5 U.S.C. § 7342); travel paid for by a Federal political committee; travel provided to a spouse or dependent child that is totally independent of his or her relationship to you.

Source	Date(s)	Point of Departure—Destination—Point of Return	Lodging? (Y/N)	Food? (Y/N)	Was a Family Member Included? (Y/N)	Any time not at sponsor's expense
Examples: Chicago Chamber of Commerce	Mar. 2	Wash., D.C.—Chicago—Wash., D.C.	N	N	N	N
Examples: Roycroft Corporation	Aug. 6–13	Wash., D.C.—Los Angeles—Cleveland	Y	Y	Y	4 Days
Western Social Science Assoc	April 24-28	Wash D.C - Albuquerque - Wash. D.C.	No	No	No	No
AFL-CIO	Oct 24-25	Wash D.C - El Paso Tx - Wash D.C.	Yes	Yes	No	No
InterHealth Nutritionals Inc.	Sept 26-28	Wash D.C. - New York - Wash D.C.	Yes	No	No	No

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SCHEDULE VIII — POSITIONS

Report all positions, compensated or uncompensated, held during the current calendar year as an officer, director, trustee of an organization, partner, proprietor, representative, employee, or consultant of any corporation, firm, partnership, or other business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States.

Exclude: Positions held in any religious, social, fraternal, or political entities; positions solely of an honorary nature; and positions listed on Schedule I.

Position	Name of Organization
	NONE

SCHEDULE IX — AGREEMENTS

Identify the date, parties to, and general terms of any agreement or arrangement with respect to: future employment, a leave of absence during the period of government service; continuation or deferral of payments by a former or current employer other than the U.S. Government; or continuing participation in an employee welfare or benefit plan maintained by a former employer.

Date	Parties To	Terms of Agreement
	NONE	

Use additional sheets if more space is required.

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UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1997

Form A
For use by Members, officers, and employees

Diana Louise DeGette
(Full Name)

1404 Longworth HOB
(Mailing Address)

Washington, DC 20515
Daytime Telephone 202-225-4431

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Filer Status	[X]	Member of the U S House of Representatives	State CO District 01	[ ]	Officer or Employee	Employing Office
Report Type	[X]	Annual (May 15)	[ ] Amendment	[ ]	Termination	Termination Date

A $200 penalty shall be assessed against anyone who files more than 30 days late.

PRELIMINARY INFORMATION -- ANSWER EACH OF THESE QUESTIONS

I Did you or your spouse have "earned" income (e g , salaries or fees) of $200 or more from any source in the reporting period? **If yes, complete and attach Schedule I.** Yes [X] No [ ]

II Did any individual or organization make a donation to charity in lieu of paying you for a speech, apppearance, or article in the reporting period? **If yes, complete and attach Schedule II.** Yes [ ] No [X]

III Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? **If yes, complete and attach Schedule III.** Yes [X] No [ ]

IV Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset worth more than $1,000 in the reporting period? **If yes, complete and attach Schedule IV.** Yes [X] No [ ]

V Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? **If yes, complete and attach Schedule V.** Yes [X] No [ ]

VI Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (I e , aggregating more than $250 and not otherwise exempt)? **If yes, complete and attach Schedule VI.** Yes [ ] No [X]

VII Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $250 from one source)? **If yes, complete and attach Schedule VII.** Yes [X] No [ ]

VIII Did you hold any reportable positions on or before the date of filing in the current calendar year? **If yes, complete and attach Schedule VIII.** Yes [X] No [ ]

IX Did you have any reportable agreement or arrangement with an outside entity? **If yes, complete and attach Schedule IX.** Yes [ ] No [X]

Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION -- ANSWER EACH OF THESE QUESTIONS

TRUSTS- Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child? (See Instructions, pages 10-11) Yes [ ] No [X]

EXEMPTION Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption? (See Instructions, page 11) Yes [ ] No [X]

CERTIFICATION -- THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct or its designee Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil penalties and criminal sanctions (See 5 U S C app 4, 104 and 18 U S C 1001)

SIGNATURE OF REPORTING INDIVIDUAL: Diana DeGette

DATE (Month/Day/Year): 5-15-98

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Name Diana Louise DeGette	Page ___ of __

SCHEDULE I -- EARNED INCOME

List the source, type, and amount of earned income from any source (other than the filer's current employment by the U.S. Government) totalling $200 or more during the preceding calendar year. For a spouse, list the source and amount of any honoraria; list only the source for other spouse earned income exceeding $1,000. For further information, see Instructions, pages 12-13

	Source	Type	Amount
Examples	Keene State	Approved Teaching Fee	$10,000
	State of Maryland	Legislative Pension	$9,000
	Civil War Roundtable (Oct. 2nd)	Spouse Speech	$1,000
	Ontario County Board of Education	Spouse Salary	NA
	U.S. House of Representatives	Salary	$123,044.38
	VanderWerf & Lipinsky, P.C.	Spouse Income	NA
	Spouse self-employment	Spouse Salary	NA
	McKenna & Cuneo, LLP	Spouse Salary	NA

For payments to charity in lieu of honoraria, use Schedule II.

Name	Page ___ of ___

SCHEDULE II -- PAYMENTS IN LIEU OF HONORARIA MADE TO CHARITY

List the source, activity (i e , speech, appearance, or article), date, and amount of any payment made by the sponsor of an event to a charitable organization in lieu of an honorarium
A separate confidential list of charities receiving such payments must be filed directly with the Committe on Standards of Official Conduct An envelope for transmitting the list is included in each Member's filing package For further information, see Instructions, pages 13-14

	Source	Activity	Date	Amount
Examples	Association of American Associations, Wash , D C	Speech	Feb 2, 1994	$2,000
	XYZ Magazine	Article	Aug 13, 1994	$500
N/A				

SCHEDULE III -- ASSETS AND "UNEARNED" INCOME

JT	290 Elm Street, Denver, CO (rental property)	$250,001 - $500,000		$2,501 - $5,000	NA
SP	Fidelity Cash Reserves (IRA includes IRA rolled over from VanderWerf & Lipinsky, P C pension and profit-sharing plans)	$50,001 - $100,000	Dividends	$1,001 - $2,500	P
SP	Walt Disney Co. Common stock (IRA)	$15,001 - $50,000	Dividends	$201 - $1,000	NA
SP	Diagnostic Products Corp. Common stock (IRA)	$1,001 - $15,000	Dividends	$1 - $200	NA
SP	Morrison Knudsen Corp. (IRA)	$1,001 - $15,000	Dividends	None	NA
SP	VanderWerf & Lipinsky, P C. (ownership interest)	$1,001 - $15,000	Distribution	$5,000 - $15,000	S
SP	VanderWerf & Lipinsky, P C , profit-sharing plan (managed by Wagner Investment Management, Inc)	$15,001 - $50,000	Interest	None	S
SP	VanderWerf & Lipinsky, P C Pension plan (same manager)	$15,001 - $50,000	Interest	None	S
SP	Fidelity Magellan Fund (IRA)	$50,001 - $100,000	Capital Gains and Dividends	$2,501 - $5,000	NA
SP	Motivepower Indus Inc f/k/a MK Rail Corp. (IRA)	$1,001 - $15,000	Dividends	None	NA

Name Diana Louise DeGette	Page ____ of ___

SCHEDULE IV -- TRANSACTIONS

Report any purchase, sale, or exchange by you, your spouse, or dependent child during the reporting year of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child, or the purchase or sale of your personal residence, unless it is rented out. For further information, see Instructions, pages 20-21.

SP,DC,JT	Asset	Type of Transaction	Date	Amount of Transaction
	Example Mega Corporation Common Stock	Purchase	10/12/94	$15,001 - $50,000
JT	Fidelity Magellan Fund	Sold	01/28/97	$1,001 - $15,000

Name Diana Louise DeGette	Page __ of __

SCHEDULE V -- LIABILITIES

Report liabilities of over $10,000 owed to any one creditor ***at any time*** during the reporting period by you, your spouse, or dependent child. Mark the highest amount owed during the year.
Exclude: Any mortgage on your personal residence (unless it is rented out), loans secured by automobiles, household furniture, or appliances, and liabilities owed to a spouse, or the child, parent, or sibling of you or your spouse. Report ***revolving charge accounts*** only if the balance at the end of the reporting period exceeded $10,000. For further information, see Instructions, pages 21-22.

SP,DC,JT	Creditor	Type of Liability	Amount of Liability
	Example First Bank of Wilmington, Delaware	Mortgage on 123 Main St., Dover, Del	$100,001 - $250,000
JT	Norwest Bank Colorado, N.A.	Business line of credit	$15,001 - $50,000
JT	First Card	Revolving charge account	$15,001 - $50,000
JT	GE Capital Mortgage	Mortgage on rental property	$250,001 - $500,000
JT	Norwest Bank Colorado, N.A.	Mortgage on rental property	$50,001 - $100,000
JT	MBNA	Revolving charge account	$10,001 - $15,000

SCHEDULE VII -- TRAVEL PAYMENTS AND REIMBURSEMENTS

Identify the source and list travel itinerary, dates, and nature of expenses provided for travel and travel-related expenses totalling more than $250 received by you, your spouse, or a dependent child during the reporting period. Indicate whether a family member accompanied the traveler at the sponsor's expense, and the amount of time, if any, that was not at the sponsor's expense. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor.
Exclude: Travel-related expenses provided by federal, state and local governments, or by a foreign government required to be separately reported under the Foreign Gifts and Decorations Act (5 U.S.C. 7342), travel paid for by a Federal political committee, travel provided to a spouse or dependent child that is totally independent of his or her relationship to you. For further information, see Instructions, pages 24-26.

	Source	Date(s)	Point of Departure--Destination--Point of Return	Lodging? (Y/N)	Food? (Y/N)	Was a Family Member Included? (Y/N)	Any time not at sponsor's expense
Examples	Chicago Chamber of Commerce	Mar 2	Wash., D.C.-Chicago-Wash., D.C.	N	N	N	N
	Mega Corporation	Aug 6-13	Wash., D.C.-Los Angeles-Cleveland	Y	Y	Y	4 Days
				N	N	N	
See attached Appendix A							

As of May 14, 1998

Rep. Diana DeGette (Colorado-1st)
1997 Financial Disclosure Report

SOURCE: Speaker or conference participant and there was no additional time not at the sponsor's expense unless otherwise noted.	**DISPOSITION TO CHARITY**	**EXPENSES**
3/7-3/9 Aspen Institute in Hershey, PA Attended the Bipartisan Congressional Retreat with spouse and two daughters.	0	Self & Spouse: (hotel & meals) 620.00
4/18 New York Stock Exchange (NYSE) in New York City, NY Attended meeting with officials of the NYSE and viewed NYSE operation with spouse.	0	Self & Spouse: (air, ground, & meal) DC-NY-DC 1,064.66
NOTE: Stayed two additional nights **not** at sponsor's expense.		
5/16 New York University School of Law in New York City, NY Gave the convocation address.	0	(air & ground) DC-NY-DC 403.70
6/28-7/3 Alaska Wilderness League for a fact-finding tour of the Arctic Refuge.	0	(air, ground, 5 nights meals, & lodging) Denver-Fairbanks- Anchorage-Denver 2,030.42
11/1 New York University School of Law Root-Tilden-Snow Scholarship Program in New York City, NY Attended the semi-annual Circuit Secretaries meeting.	0	(air & ground) DC-NY-Denver 1,050.00

Name Diana Louise DeGette | Page ____ of ___

SCHEDULE III -- ASSETS AND "UNEARNED" INCOME

BLOCK A **Asset and/or Income Source** Identify (a) each asset held for investment or production of income with a fair market value exceeding $1,000 at the end of the reporting year, and (b) any other asset or source of income which generated more than $200 in "unearned" income during the year. For rental property or land, provide an address. Provide full names of any mutual funds. For an IRA or retirement plan that is *self-directed*, list the underlying assets worth more than $1,000. For an IRA or retirement plan that is *not* self-directed, name the institution holding the account. **Exclude**: Your personal residence(s) (unless there is rental income), any debt owed to you by your spouse, or by your or your spouse's child, parent, or sibling, any deposits totalling $5,000 or less in personal savings accounts, any financial interests in or income derived from U.S. Government retirement programs. If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC) or is jointly held (JT), in the optional column on the far left.			BLOCK B **Value of Asset** at close of reporting year If you use a valuation method other than fair market value, please specify the method used. If an asset was sold and is included only because it generated income, the value should be "None."	BLOCK C **Type of Income** If other than one of the listed categories, specify the type of income by writing a brief description in this block	BLOCK D **Amount of Income** For IRA's and retirement plans that are *not* self-directed, you may write in "NA" for income	BLOCK E **Transaction** Indicate if asset was purchased(P), sold(S), or exchanged(E) in reporting year
For further information, see Instructions, pages 14-20						
SP DC, *Examples* JT	SP	Mega Corp Stock 123 Main St Dover, Del 1st Bank of Paducah, KY accounts	$15,001 - $50,000 $250,001 - $500,000 $50,001 - $100,000	Dividends Rent Interest	$201 - $1,000 $1,001 - $2,500 $5,001 - $15,000	P
		Public Employees Retirement Assn (PERA)-retirement account	$1,001 - $15,000	Interest	$201 - $1,000	N/A
		Woolworth Corp common stock (IRA)	$1,001 - $15,000	Dividends	None	NA
		Fidelity Cash Reserves (IRA)	$1,001 - $15,000	Dividends	$1 - $200	NA
		Fidelity Magellan Fund (IRA)	$15,001 - $50,000	Capital Gains and Dividends	$1,001 - $2,500	NA
JT		Colorado National Bank	$1,001 - $15,000	Interest	$1 - $200	NA
JT		Fidelity Magellan Fund	$1 - $1,000	Capital Gains and Dividends	$1 - $200	NA
JT		Fidelity Cash Reserves	$1,001 - $15,000	Dividends	$1 - $200	NA

Name Diana Louise DeGette	Page ____ of ___

SCHEDULE VIII -- POSITIONS

Report all positions, compensated or uncompensated, held during the current calendar year as an officer, director, trustee of an organization, partner, proprietor, representative, employee, or consultant of any corporation, firm, partnership, or other business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States. For further information, see Instructions, page 26

Exclude: Positions held in any religious, social, fraternal, or political entities, positions solely of an honorary nature, and positions listed on Schedule I

Position	Organization
Director	Planned Parenthood of the Rocky Mountains
Circuit Secretary, Root Tilden Program	New York University School of Law

Name	Page ___ of ___

SCHEDULE VI -- GIFTS

Report the source, a brief description, and the value of all gifts totalling more than $250 received by you, your spouse, or a dependent child from any source during the year.
Exclude: Gifts from relatives, gifts of personal hospitality of an individual, local meals, and gifts to a spouse or dependent child that are totally independent of his or her relationship to you. Gifts with a value of $100 or less need not be added towards the $250 disclosure threshold
Note: The gift rule (House Rule 52 in the 104th Congress, renumbered as House Rule 51 of the 105th Congress) prohibits gifts except as specifically provided in the rule
For further information, see Instructions, pages 22-24

Source		Description	Value
Example	Mr. Joseph H. Smith, Anytown, Anystate	Silver Platter (waiver received from Committee on Standards)	$270

Name	Page ___ of ___

SCHEDULE IX -- AGREEMENTS

Identify the date, parties to, and general terms of any agreement or arrangement with respect to future employment, a leave of absence during the period of government service, continuation or deferral of payments by a former or current employer other than the U.S. Government, or continuing participation in an employee welfare or benefit plan maintained by a former employer. For further information, see Instructions, pages 26-27

Date	Parties To	Terms of Agreement

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1997

Form A
For use by Members, officers, and employees

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LEGISLATIVE RESOURCE CENTER
98 MAY 14 PM 3:02
OFFICE OF THE CLERK
U.S. HOUSE OF REPRESENTATIVES

INSIDE MAIL
MC
(Office Use Only)

8

William David Delahunt
(Full Name)

1517 Longworth House Office Building
(Mailing Address)

Washington DC 20515

Daytime Telephone
202-225-3111

Filer Status	[X] Member of the U.S House of Representatives	State MA	District 10	[ ] Officer or Employee	Employing Office
Report Type	[X] Annual (May 15)	[ ] Amendment		[ ] Termination	Termination Date

A $200 penalty shall be assessed against anyone who files more than 30 days late.

PRELIMINARY INFORMATION -- ANSWER EACH OF THESE QUESTIONS

I. Did you or your spouse have "earned" income (e.g., salaries or fees) of $200 or more from any source in the reporting period? **If yes, complete and attach Schedule I** — Yes [X] No [ ]

II. Did any individual or organization make a donation to charity in lieu of paying you for a speech, apppearance, or article in the reporting period? **If yes, complete and attach Schedule I** — Yes [ ] No [X]

III. Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? **If yes, complete and attach Schedule III.** — Yes [X] No [ ]

IV. Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset worth more than $1,000 in the reporting period? **If yes, complete and attach Schedule IV.** — Yes [X] No [ ]

V. Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? **If yes, complete and attach Schedule V.** — Yes [X] No [ ]

VI. Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $250 and not otherwise exempt)? **If yes, complete and attach Schedule VI.** — Yes [ ] No [X]

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VIII. Did you hold any reportable positions on or before the date of filing in the current calendar year? **If yes, complete and attach Schedule VIII.** — Yes [X] No [ ]

IX. Did you have any reportable agreement or arrangement with an outside entity? **If yes, complete and attach Schedule IX.** — Yes [ ] No [X]

Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION -- ANSWER EACH OF THESE QUESTIONS

TRUSTS-Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child? (See Instructions, pages 10-11.) — Yes [ ] No [X]

EXEMPTION Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption? (See Instructions, page 11.) — Yes [ ] No [X]

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This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended. The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct or its designee. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil penalties and criminal sanctions (See 5 U.S.C. app. 4, 104 and 18 U.S.C 1001).

SIGNATURE OF REPORTING INDIVIDUAL William D. Delahunt

DATE (Month/Day/Year) 5/14/98

890

SCHEDULE I -- EARNED INCOME

List the source, type, and amount of earned income from any source (other than the filer's current employment by the U.S. Government) totalling $200 or more during the preceding calendar year. For a spouse, list the source and amount of any honoraria; list only the source for other spouse earned income exceeding $1,000. For further information, see Instructions, pages 12-13.

	Source	Type	Amount
Examples:	Keene State	Approved Teaching Fee	$10,000
	State of Maryland	Legislative Pension	$9,000
	Civil War Roundtable (Oct. 2nd)	Spouse Speech	$1,000
	Ontario County Board of Education	Spouse Salary	NA
	Commonwealth of Massachusetts Retirement System	Pension	$54,000 00

For payments to charity in lieu of honoraria, use Schedule II.

SCHEDULE III -- ASSETS AND "UNEARNED" INCOME

BLOCK A **Asset and/or Income Source** Identify (a) each asset held for investment or production of income with a fair market value exceeding $1,000 at the end of the reporting year, and (b) any other asset or source of income which generated more than $200 in "unearned" income during the year. For rental property or land, provide an address. Provide full names of any mutual funds. For an IRA or retirement plan that is *self-directed,* list the underlying assets worth more than $1,000. For an IRA or retirement plan that is *not* self-directed, name the institution holding the account **Exclude:** Your personal residence(s) (unless there is rental income); any debt owed to you by your spouse, or by your or your spouse's child, parent, or sibling; any deposits totalling $5,000 or less in personal savings accounts; any financial interests in or income derived from U.S. Government retirement programs If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC) or is jointly held (JT), in the optional column on the far left For further information, see Instructions, pages 14-20	BLOCK B **Value of Asset** at close of reporting year. If you use a valuation method other than fair market value, please specify the method used. If an asset was sold and is included only because it generated income, the value should be "None."	BLOCK C **Type of Income** If other than one of the listed categories, specify the type of income by writing a brief description in this block	BLOCK D **Amount of Income** For IRA's and retirement plans that are *not* self-directed, you may write in "NA" for income	BLOCK E **Transaction** Indicate if asset was purchased(P), sold(S), or exchanged(E) in reporting year
SP DC *Examples:* SP JT	Mega Corp. Stock 123 Main St., Dover, Del. 1st Bank of Paducah, KY accounts	$15,001 - $50,000 $250,001 - $500,000 $50,001 - $100,000	Dividends Rent Interest	$201 - $1,000 $1,001 - $2,500 $5,001 - $15,000	P
Loan Receivable From Farrington Acq. Realty Trust	$15,001 - $50,000	Interest	$1,001 - $2,500	
Unit #5 Kingwood Condominium, Quechee, VT	$15,001 - $50,000	Rent	$1,001 - $2,500	
Commonwealth of Massachusetts Deferred Compensation Plan	$250,001 - $500,000	Interest	$15,001 - $50,000	

SCHEDULE IV -- TRANSACTIONS

Report any purchase, sale, or exchange by you, your spouse, or dependent child during the reporting year of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child, or the purchase or sale of your personal residence, unless it is rented out. For further information, see instructions, pages 20-21.

SP,DC,JT	Asset	Type of Transaction	Date	Amount of Transaction
	Example: Mega Corporation Common Stock	Purchase	10/12/94	$15,001 - $50,000
	Unit #5, Kingwood Condominium, Quechee, VT	Exchange	01/02/97	$1,001 - $15,000

SCHEDULE V -- LIABILITIES

Report liabilities of over $10,000 owed to any one creditor ***at any time*** during the reporting period by you, your spouse, or dependent child. Mark the highest amount owed during the year.
Exclude: Any mortgage on your personal residence (unless it is rented out), loans secured by automobiles, household furniture, or appliances, and liabilities owed to a spouse, or the child, parent, or sibling of you or your spouse. Report ***revolving charge accounts*** only if the balance at the end of the reporting period exceeded $10,000. For further information, see instructions, pages 21-22.

SP,DC,JT	Creditor	Type of Liability	Amount of Liability
	Example First Bank of Wilmington, Delaware	Mortgage on 123 Main St., Dover, Del	$100,001 - $250,000
	Wendover Funding, Greensboro, NC,	Mortgage on 9 Ketch Lane, Quincy, MA	$100,001 - $250,000
	First N.H. Bank of Lebanon, Lebanon, NH	Mortgage on Condo Unit 5-D, Quechee, VT	$15,001 - $50,000
	First Trade Union Savings Bank, Boston MA	Guarantor of Motgage on 24 Washburn Ave , Cambridge, MA	$100,001 - $250,000
	First Trade Union Savings Bank, Boston, MA	Mortgage on various condo units - please see attatched for details	$250,001 - $500,000

Schedule V - Liabilities

FIRST TRADE UNION SAVINGS BANK

Address and Description of Property
(all units are apartment-style condominiums)

1999 Commonwealth Avenue, Brighton, MA - #4

1999 Commonwealth Avenue, Brighton, MA - #24

2001 Commonwealth Avenue, Brighton, MA - #18

2001 Commonwealth Avenue, Brighton, MA - #19

2001 Commonwealth Avenue, Brighton, MA - #31

2003 Commonwealth Avenue, Brighton, MA - #5

2003 Commonwealth Avenue, Brighton, MA - #22

2003 Commonwealth Avenue, Brighton, MA - #29

15 Parkvale Avenue, Brighton, MA - #28

15 Parkvale Avenue, Brighton, MA - #5

15 Parkvale Avenue, Brighton, MA - #6

15 Parkvale Avenue, Brighton, MA - #7

15 Parkvale Avenue, Brighton, MA - #8

Notes:

- Underlying assets (ownership of the condominiums) previously transferred by Mr. Delahunt to Triplet Irrevocable Trust, but the liability remained with him.
- In January 1997, Mr. Delahunt's liability was extinguished, as the Trust legally assumed the relevant mortgage as well as ownership of the underlying assets.
- The beneficiaries of the Trust are Mr. Delahunt's former wife and two adult children.

SCHEDULE VII -- TRAVEL PAYMENTS AND REIMBURSEMENTS

Identify the source and list travel itinerary, dates, and nature of expenses provided for travel and travel-related expenses totalling more than $250 received by you, your spouse, or a dependent child during the reporting period. Indicate whether a family member accompanied the traveler at the sponsor's expense, and the amount of time, if any, that was not at the sponsor's expense. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor.
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Source	Date(s)	Point of Departure--Destination--Point of Return	Lodging? (Y/N)	Food? (Y/N)	Was a Family Member Included? (Y/N)	Any time not at sponsor's expense
Examples Chicago Chamber of Commerce Mega Corporation	Mar 2 Aug 6-13	Wash., D.C.-Chicago-Wash., D.C. Wash., D.C.-Los Angeles-Cleveland	N Y	N Y	N Y	N 4 Days
Invest to Compete Alliance	July 3 - 6	Chatham, MA	Y	Y	N	N
The Heritage Foundation	January 9-11	Wash, DC - Chantilly, VA - Wash, DC	Y	Y	N	N
The Aspen Institute	March 7-9	Wash, DC - Hershey, PA - Wash, DC	Y	Y	N	N
The Brookings Institution and AEI	January 4 - 6	Wash, DC - Annapolis, MD - Wash, DC	Y	Y	N	N

SCHEDULE VIII -- POSITIONS

Report all positions, compensated or uncompensated, held during the current calendar year as an officer, director, trustee of an organization, partner, proprietor, representative, employee, or consultant of any corporation, firm, partnership, or other business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States. For further information, see Instructions, page 26.

Exclude: Positions held in any religious, social, fraternal, or political entities, positions solely of an honorary nature, and positions listed on Schedule I.

Position	Organization
Memeber, Board of Directors	Massachusetts Association for Mental Health

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1997

FORM A
For use by Members, officers, and employees

98 MAY 15 PM 4:08

Rosa L. DeLauro
(Full Name)

49 Huntington Avenue
(Mailing Address)

New Haven, CT 06511

(202) 225-3661
Daytime Telephone

HAND DELIVERED

MC (11)
(Office Use Only)

Filer Status	[X] Member of the U.S. House of Representatives	State District	[ ] Officer or Employee	Employing Office	
Report Type	[X] Annual (May 15)	[ ] Amendment	[ ] Termination	Termination Date	

A *$200 penalty* shall be assessed against anyone who files more than 30 days late.

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I. Did you or your spouse have "earned" income (e.g., salaries or fees) of $200 or more from any source in the reporting period? **If yes, complete and attach Schedule I.** Yes [X] No [ ]

II. Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? **If yes, complete and attach Schedule II.** Yes [ ] No [X]

III. Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? **If yes, complete and attach Schedule III.** Yes [X] No [ ]

IV. Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset worth more than $1,000 in the reporting period? **If yes, complete and attach Schedule IV.** Yes [ ] No [X]

V. Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? **If yes, complete and attach Schedule V.** Yes [X] No [ ]

VI. Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $250 and not otherwise exempt)? **If yes, complete and attach Schedule VI.** Yes [ ] No [X]

VII. Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $250 from one source)? **If yes, complete and attach Schedule VII.** Yes [X] No [ ]

VIII. Did you hold any reportable positions on or before the date of filing in the current calendar year? **If yes, complete and attach Schedule VIII** Yes [X] No [ ]

IX. Did you have any reportable agreement or arrangement with an outside entity? **If yes, complete and attach Schedule IX** Yes [ ] No [X]

Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION — ANSWER EACH OF THESE QUESTIONS

TRUSTS—Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child? Yes [ ] No [X]

EXEMPTION—Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption? Yes [ ] No [X]

CERTIFICATION — THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended. The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct or its designee. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil penalties and criminal sanctions (*See* 5 U.S.C. app. 4, §104 and 18 U.S.C. §1001)

SIGNATURE OF REPORTING INDIVIDUAL

DATE (Month/Day/Year)
May 15, 1998

SCHEDULE I — EARNED INCOME

List the source, type, and amount of earned income from any source (other than the filer's current employment by the U.S. Government) totalling $200 or more during the preceding calendar year. For a spouse, list the source and amount of any honoraria, list only the source for other spouse earned income exceeding $1,000

	Source	Type	Amount
Examples	Keene State	Approved Teaching Fee	$6,000
	State of Maryland	Legislative Pension	$9,000
	Civil War Roundtable (Oct 2nd)	Spouse Speech	$1,000
	Ontario County Board of Education	Spouse Salary	NA
	Greenberg Research, Inc.	Spouse Salary	N/A

For payments to charity in lieu of honoraria, use Schedule II.

SCHEDULE II — PAYMENTS IN LIEU OF HONORARIA MADE TO CHARITY

List the source, activity (i.e., speech, appearance, or article), date, and amount of any payment made by the sponsor of an event to a charitable organization in lieu of an honorarium. A separate confidential list of charities receiving such payments must be filed directly with the Committee on Standards of Official Conduct. An envelope for transmitting the list is included in each Member's filing package.

	Source	Activity	Date	Amount
Examples	Association of American Associations, Wash., D.C.	Speech	Feb. 2, 1997	$2,000
	XYZ Magazine	Article	Aug. 13, 1997	$500
	None			

This page may be copied if more space is required.

SCHEDULE III — ASSETS AND "UNEARNED" INCOME

BLOCK A — Asset and/or Income Source

Identify (a) each asset held for investment or production of income with a fair market value exceeding $1,000 at the end of the reporting year, and (b) any other asset or source of income which generated more than $200 in "unearned" income during the year. For rental property or land, provide an address. Provide full names of any mutual funds. For an IRA or retirement plan that is *self-directed*, list the underlying assets worth more than $1,000. For an IRA or retirement plan that is not selfdirected, name the institution holding the account.

Exclude: Your personal residence(s) (unless there is rental income), any debt owed to you by your spouse, or by your or your spouse's child, parent, or sibling, any deposits totalling $5,000 or less in personal savings accounts, any financial interests in or income derived from U.S. Government retirement programs.

If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC) or is jointly held (JT), in the optional column on the far left.

BLOCK B — Value of Asset

at close of reporting year
If you use a valuation method other than fair market value, please specify the method used. If an asset was sold and is included only because it generated income, the value should be "None."

BLOCK C — Type of Income

BLOCK D — Amount of Income

For IRA's and retirement plans that are *not* self-directed, you may write in "NA" for income

BLOCK E — Transaction

Indicate if asset was purchased (P), sold (S), or exchanged (E) in reporting year

	BLOCK A	BLOCK B												BLOCK C								BLOCK D											BLOCK E
		A None	B $1 – $1,000	C $1,001 – $15,000	D $15,001 – $50,000	E $50,001 – $100,000	F $100,001 – $250,000	G $250,001 – $500,000	H $500,001 – $1,000,000	I $1,000,001 – $5,000,000	J $5,000,001 – $25,000,000	K $25,000,001 – $50,000,000	L Over $50,000,000	DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Type of Income (Specify For Example: Partnership Income or Farm Income)	I None	II $1 – $200	III $201 – $1,000	IV $1,001 – $2,500	V $2,501 – $5,000	VI $5,001 – $15,000	VII $15,001 – $50,000	VIII $50,001 – $100,000	IX $100,001 – $1,000,000	X $1,000,001 – $5,000,000	XI Over $5,000,000	
SP, DC, JT	*Examples*		Indefinite				X							X		X				Royalties				X		X							P
							X															X											
JT	Political Properties (30% owner) General Partnership (150 Shares)						X							Partnership Income Statement I							X												
SP	Greenberg Research, Inc.								X					Statement II							X												
JT	Horizon Towers & Executive House (½ of share-own 1,237½)				X									Statement III							X												
	Holding New Haven 124 Units 5 Acres																																
	Colonial Executive Ltd. Partnership																																
SP	Merrill Lynch Profit Sharing-Greenberg Research, Inc.						X							X											X								

For additional assets and unearned income, use next page.

SCHEDULE III — ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Name Rosa L. DeLauro | Page 5 of 9

	BLOCK A	BLOCK B											BLOCK C							BLOCK D										BLOCK E
	Asset and/or Income Source	Year-End Value of Asset											Type of Income							Amount of Income										Transaction
SP DC JT		A None	B $1 – $1,000	C $1,001 – $15,000	D $15,001 – $50,000	E $50,001 – $100,000	F $100,001 – $250,000	G $250,001 – $500,000	H $500,001 – $1,000,000	I $1,000,001 – $5,000,000	J $5,000,001 – $25,000,000	K $25,000,001 – $50,000,000	L Over $50,000,000	DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Type of Income (Specify)	I None	II $1 – $200	III $201 – $1,000	IV $1,001 – $2,500	V $2,501 – $5,000	VI $5,001 – $15,000	VII $15,001 – $50,000	VIII $50,001 – $100,000	IX $100,001 – $1,000,000	X $1,000,001 – $5,000,000	XI Over $5,000,000	P, S, E
SP	TIAA/CREF Pension Plan						X							X									X							
	TIAA/CREF Pension Plan					X								X									X							
JT	Sequoia Nat'l Bank			X												X							X							
SP	Sequoia Nat'l Bank(P/R)			X												X						X								
SP	Sequoia Nat'l Bank(H/T)		X													X						X								
JT	Fleet Bank Savings(CT)		X													X				X										
	Ted DeLauro Scholarship Fund Fleet Bank, CT			X												X					X									
	Following assets in joint name with my mother, Louise DeLauro for estate planning purposes only. Assets are under control of and all income is reported by joint tenant, Louise DeLauro:																													
	Savings account																													
JT	New Haven Savings Bank					X										X						X								
JT	Franklin Federal Tax Free Fund			X										X								X								
JT	Dryfus Capital Value Fund			X										X							X									

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SCHEDULE IV — TRANSACTIONS

Name Rosal. DeLauro | Page 6 of 9

Report any purchase, sale, or exchange by you, your spouse, or dependent child during the reporting year of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child, or the purchase or sale of your personal residence, unless it is rented out.

SP, DC, JT	Asset	Type of Transaction: PURCHASE	SALE	EXCHANGE	Date (MO/DAY/YR)	Amount of Transaction: B ($1,001–$15,000)	C ($15,001–$50,000)	D ($50,001–$100,000)	E ($100,001–$250,000)	F ($250,001–$500,000)	G ($500,001–$1,000,000)	H ($1,000,001–$5,000,000)	I ($5,000,001–$25,000,000)	J ($25,000,001–$50,000,000)	K (Over $50,000,000)
SP	*Example* Mega Corporation Common Stock	X			10-12-97		X								
	None														

This page may be copied if more space is required.

Name	Rosa L. DeLauro	Page 7 of 9

SCHEDULE V — LIABILITIES

Report liabilities of over $10,000 owed to any one creditor ***at any time*** during the reporting period by you, your spouse, or dependent child. Mark the highest amount owed during the year. **Exclude:** Any mortgage on your personal residence (unless it is rented out), loans secured by automobiles, household furniture, or appliances, and liabilities owed to a spouse, or the child, parent, or sibling of you or your spouse. Report ***revolving charge accounts*** only if the balance at the end of the reporting period exceeded $10,000.

SP, DC, JT	Creditor	Type of Liability	Amount of Liability										
			B $10,001–$15,000	C $15,001–$50,000	D $50,001–$100,000	E $100,001–$250,000	F $250,001–$500,000	G $500,001–$1,000,000	H $1,000,001–$5,000,000	I $5,000,001–$25,000,000	J $25,000,001–$50,000,000	K Over $50,000,000
Example	First Bank of Wilmington, Delaware	Mortgage on 123 Main St., Dover, Del				X						
JT	Sequoia National Bank	Mortgage on rental property 515 Second St., WDC (30%)				X						
SP	Colorado Student Loan	Parent-Student College Loan P.O. Box 1649, Denver, CO	X									

SCHEDULE VI — GIFTS

Report the source, a brief description, and the value of all gifts totalling more than $250 received by you, your spouse, or a dependent child from any source during the year.

Exclude: Gifts from relatives, gifts of personal hospitality of an individual, local meals, and gifts to a spouse or dependent child that are totally independent of his or her relationship to you. Gifts with a value of $100 or less need not be added towards the $250 disclosure threshold.

Note: The gift rule (House Rule 51) prohibits gifts except as specifically provided in the rule.

Source	Description	Value
Example Mr. Joseph H. Smith, Anytown, Anystate	Silver Platter (determination on personal friendship received from Committee on Standards)	$270
None		

Use additional sheets if more space is required.

SCHEDULE VII —TRAVEL PAYMENTS AND REIMBURSEMENTS

Identify the source and list travel itinerary, dates, and nature of expenses provided for travel and travel-related expenses totalling more than $250 received by you, your spouse, or a dependent child during the reporting period. Indicate whether a family member accompanied the traveler at the sponsor's expense, and the amount of time, if any, that was not at the sponsor's expense. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor.

Exclude: Travel-related expenses provided by federal, state, and local governments, or by a foreign government required to be separately reported under the Foreign Gifts and Decorations Act (5 U.S.C. § 7342); travel paid for by a Federal political committee, travel provided to a spouse or dependent child that is totally independent of his or her relationship to you

Source	Date(s)	Point of Departure—Destination—Point of Return	Lodging? (Y/N)	Food? (Y/N)	Was a Family Member Included? (Y/N)	Any time not at sponsor's expense
Examples Chicago Chamber of Commerce	Mar. 2	Wash., D.C.—Chicago—Wash., D.C.	N	N	N	N
Roycroft Corporation	Aug. 6–13	Wash., D.C.—Los Angeles—Cleveland	Y	Y	Y	4 Days
The Aspen Institute	3/7-8/97	WDC - Hershey, PA	Y	Y	Y	N
Adams & Associates	5/9/97	WDC - Laurel, MD - WDC	N	Y	N	N

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SCHEDULE VIII — POSITIONS

Report all positions, compensated or uncompensated, held during the current calendar year as an officer, director, trustee of an organization, partner, proprietor, representative, employee, or consultant of any corporation, firm, partnership, or other business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States.

Exclude: Positions held in any religious, social, fraternal, or political entities; positions solely of an honorary nature; and positions listed on Schedule I.

Position	Name of Organization
Fellow	Timothy Dwight College - Yale University
Board of Directors ~~Director~~	(HIPPY, USA) Home Instruction Program for Preschool Youngsters

SCHEDULE IX — AGREEMENTS

Identify the date, parties to, and general terms of any agreement or arrangement with respect to: future employment; a leave of absence during the period of government service; continuation or deferral of payments by a former or current employer other than the U.S. Government; or continuing participation in an employee welfare or benefit plan maintained by a former employer

Date	Parties To	Terms of Agreement
	None	

GPO 1998 46-260 (mac)

Use additional sheets if more space is required.

Rosa L. DeLauro
49 Huntington Street
New Haven, CT 06511

House of Representatives, CT, 3rd District

ATTACHMENTS: BASIS OF VALUATION

Statement I, Schedule III, Page 4
Political Properties General Partnership

1997 D.C. Assessed Value = $555,500; 30% share $166,650.
No net income

Statement II, Schedule III, Page 4
Greenberg Research, Inc.

Shares value based on net book value of corporation and officer-shareholder compensation at 12/31/97.

Statement III, Schedule III, Page 4
Colonial Executive Limited Partnership (Ownership share = 1.2375%)

Assessed value $3,045,000 * .012375 share = $37,682 (gross value)
Letter from attorney setting out outstanding mortgage and resale value; net value = 0

2436 RAYBURN BUILDING
WASHINGTON, DC 20515-0703
(202) 225-3661

59 ELM STREET
SECOND FLOOR
NEW HAVEN, CT 06510
(203) 562-3718

KILLINGWORTH CLINTON
(203) 669-1181

STRATFORD
203) 378-9005



UNITED STATES
HOUSE OF REPRESENTATIVES
ROSA L. DeLAURO
3D DISTRICT, CONNECTICUT

CHIEF DEPUTY WHIP

COMMITTEE ON APPROPRIATIONS

SUBCOMMITTEES
LABOR, HEALTH AND HUMAN SERVICES
AND EDUCATION

AGRICULTURE, RURAL DEVELOPMENT
FOOD AND DRUG ADMINISTRATION
AND RELATED AGENCIES

May 15, 1998

Robin H. Carle
Clerk of the House
Washington, D.C.

Dear Ms. Carle:

I am writing to request that my 1995 and 1996 Financial Disclosure statements be amended to reflect my position as a member of the Board of Directors of the Home Instruction Program for Preschool Youngsters, (HIPPY, USA), a non-profit organization. This information was inadvertently omitted from previous reports.

I also wish to amend the 1994, 1995 and 1996 statements on Schedule III-Assets and "Unearned" Income. The second entry, Greenberg Research, should have read 150 shares instead of 4750. Apparently, this was a typographical error and not discovered until this year. It was reported correctly in previous years.

Thank you for your assistance in this matter.

Sincerely,

ROSA L. DeLAURO
Member of Congress

436 Cannon Building
Washington, DC 20515-0703
(202) 225-3661

59 Elm Street
Second Floor
New Haven, CT 06510
(203) 562-3718

Killingworth Division
(203) 663-1181

Stratford
(203) 378-9005

CHIEF DEPUTY WHIP
CENTER
COMMITTEE ON APPROPRIATIONS
SUBCOMMITTEES:
LABOR-HEALTH AND HUMAN SERVICES, AND EDUCATION
VETERANS, HOUSING AND URBAN DEVELOPMENT, AND INDEPENDENT AGENCIES
MAY 15 AM 11:47
OFFICE OF THE CLERK
HOUSE OF REPRESENTATIVES

UNITED STATES
HOUSE OF REPRESENTATIVES

ROSA L. DeLAURO
3rd District, Connecticut

HAND DELIVERED

May 15, 1998

Robin H. Carle
Clerk of the House
Washington, D.C.

Dear Ms. Carle:

I am writing to request that my 1995 and 1996 Financial Disclosure statements be amended to reflect my position as a member of the Board of Directors of the Home Instruction Program for Preschool Youngsters, (HIPPY, USA), a non-profit organization. This information was inadvertently omitted from previous reports.

I also wish to amend the 1994, 1995 and 1996 statements on Schedule III-Assets and "Unearned" Income. The second entry, Greenberg Research, should have read 150 shares instead of 4750. Apparently, this was a typographical error and not discovered until this year. It was reported correctly in previous years.

Thank you for your assistance in this matter.

Sincerely,

ROSA L. DeLAURO
Member of Congress

PRINTED ON RECYCLED PAPER

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1997

Form A
For use by Members, officers, and employees

98 MAY 15 PM 1:11

Thomas Dale DeLay
(Full Name)

US Capitol, H-107
(Mailing Address)

Washington DC 20515

Daytime Telephone 202/225-0197

(Office Use Only)

5

Filer Status	[X]	Member of the U S House of Representatives	State TX District 22	[ ]	Officer or Employee	Employing Office
Report Type	[X]	Annual (May 15)	[ ] Amendment	[ ]	Termination	Termination Date

A $200 penalty shall be assessed against anyone who files more than 30 days late.

PRELIMINARY INFORMATION -- ANSWER EACH OF THESE QUESTIONS

I Did you or your spouse have "earned" income (e g , salaries or fees) of $200 or more from any source in the reporting period?
If yes, complete and attach Schedule I. Yes [ ] No [X]

II Did any individual or organization make a donation to charity in lieu of paying you for a speech, apppearance, or article in the reporting period?
If yes, complete and attach Schedule II. Yes [ ] No [X]

III Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period?
If yes, complete and attach Schedule III. Yes [X] No [ ]

IV Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset worth more than $1,000 in the reporting period?
If yes, complete and attach Schedule IV. Yes [ ] No [X]

V Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period?
If yes, complete and attach Schedule V. Yes [ ] No [X]

VI Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i e , aggregating more than $250 and not otherwise exempt)?
If yes, complete and attach Schedule VI. Yes [ ] No [X]

VII Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $250 from one source)?
If yes, complete and attach Schedule VII. Yes [X] No [ ]

VIII Did you hold any reportable positions on or before the date of filing in the current calendar year?
If yes, complete and attach Schedule VIII. Yes [X] No [ ]

IX Did you have any reportable agreement or arrangement with an outside entity?
If yes, complete and attach Schedule IX. Yes [ ] No [X]

Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION -- ANSWER EACH OF THESE QUESTIONS

TRUSTS--Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child? (See Instructions, pages 10-11) Yes [ ] No [X]

EXEMPTION-Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption? (See Instructions, page 11) Yes [ ] No [X]

CERTIFICATION -- THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct or its designee Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil penalties and criminal sanctions (See 5 U S C app 4, 104 and 18 U S C 1001)

SIGNATURE OF REPORTING INDIVIDUAL Thomas D. DeLay

DATE (Month/Day/Year) 5/14/98

SCHEDULE III -- ASSETS AND "UNEARNED" INCOME

BLOCK A **Asset and/or Income Source** Identify (a) each asset held for investment or production of income with a fair market value exceeding $1,000 at the end of the reporting year, and (b) any other asset or source of income which generated more than $200 in "unearned" income during the year. For rental property or land, provide an address. Provide full names of any mutual funds. For an IRA or retirement plan that is *self-directed*, list the underlying assets worth more than $1,000. For an IRA or retirement plan that is *not* self-directed, name the institution holding the account. **Exclude:** Your personal residence(s) (unless there is rental income); any debt owed to you by your spouse, or by your or your spouse's child, parent, or sibling; any deposits totalling $5,000 or less in personal savings accounts; any financial interests in or income derived from U.S. Government retirement programs. If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC) or is jointly held (JT), in the optional column on the far left. For further information, see instructions, pages 14-20			BLOCK B **Value of Asset** at close of reporting year If you use a valuation method other than fair market value, please specify the method used If an asset was sold and is included only because it generated income, the value should be "None."	BLOCK C **Type of Income** If other than one of the listed categories, specify the type of income by writing a brief description in this block.	BLOCK D **Amount of Income** For IRA's and retirement plans that are *not* self-directed, you may write in "NA" for income	BLOCK E **Transaction** Indicate if asset was purchased(P), sold(S), or exchanged(E) in reporting year
SP DC JT	*Examples*	SP	Mega Corp. Stock 123 Main St., Dover, Del. 1st Bank of Paducah, KY accounts	$15,001 - $50,000 $250,001 - $500,000 $50,001 - $100,000	Dividends Rent Interest	$201 - $1,000 $1,001 - $2,500 $5,001 - $15,000	P
SP	Exxon			$50,001 - $100,000	Dividends	$1,001 - $2,500	NA
JT	Congressional Federal Credit Union			$15,001 - $50,000	Dividends	$1 - $200	NA

SCHEDULE VII -- TRAVEL PAYMENTS AND REIMBURSEMENTS

Identify the source and list travel itinerary, dates, and nature of expenses provided for travel and travel-related expenses totalling more than $250 received by you, your spouse, or a dependent child during the reporting period. Indicate whether a family member accompanied the traveler at the sponsor's expense, and the amount of time, if any, that was not at the sponsor's expense. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor.
Exclude: Travel-related expenses provided by federal, state and local governments, or by a foreign government required to be separately reported under the Foreign Gifts and Decorations Act (5 U.S.C. 7342), travel paid for by a Federal political committee; travel provided to a spouse or dependent child that is totally independent of his or her relationship to you. For further information, see Instructions, pages 24-26

Source	Date(s)	Point of Departure--Destination--Point of Return	Lodging? (Y/N)	Food? (Y/N)	Was a Family Member Included? (Y/N)	Any time not at sponsor's expense
Examples Chicago Chamber of Commerce	Mar 2	Wash., D.C.-Chicago-Wash., D.C.	N	N	N	N
Mega Corporation	Aug 6-13	Wash., D.C.-Los Angeles-Cleveland	Y	Y	Y	4 Days
Congressional Insitute	Jan. 21-23, 1997	DC-VA-DC	Y	Y	Y	NA
U.S. Telephone Association	Feb. 13-15, 1997	DC-FL-DC	Y	Y	Y	NA
PSA-Bond Mrkt Trade Assoc	Feb. 27-28, 1997	DC-AZ-CA	Y	Y	N	NA
Aspen Insitute	Mar. 7-9, 1997	DC-PA-DC	Y	Y	Y	NA
Klamath Alliance for Resources & Environment	May 2-5, 1997	TX-CA-OR-DC	Y	Y	Y	NA
National Center for Public Policy Research	Aug. 5-11, 1997	TX-Russia-Czech	Y	Y	Y	NA
Ripon Education Fund	Aug 11-16, 1997	Czech - TX	Y	Y	Y	NA
Western States Coalition	Aug 27-30, 1997	TX-ID-MT-TX	Y	Y	N	NA
Free Enterprise PAC & TX Christian Coalition	Nov. 15, 1997	Houston-Dallas-Houston	Y	Y	N	NA

SCHEDULE VIII -- POSITIONS

Report all positions, compensated or uncompensated, held during the current calendar year as an officer, director, trustee of an organization, partner, proprietor, representative, employee, or consultant of any corporation, firm, partnership, or other business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States. For further information, see Instructions, page 26

Exclude: Positions held in any religious, social, fraternal, or political entities, positions solely of an honorary nature, and positions listed on Schedule I

Position	Organization
Chairman	Americans for a Republican Majority PAC

TOM DeLAY
TEXAS

98 MAY 15 PM 1:11

H-107, The Capitol
Washington, DC 20515-6503
(202) 225-0197

One Hundred Fifth Congress
U.S. House of Representatives
Office of the Majority Whip

May 14, 1998

Honorable Robin H. Carle
Clerk of the U.S. House of Representatives
Legislative Resource Center
B106 Cannon House Office Building
Washington, DC 20515-6612

Dear Clerk Carle:

Please find attached my Financial Disclosure for the calendar year 1997. For the purpose of clarity, I wish to call one item to your attention. Albo Pest Control is no longer listed as an asset, but because it does not meet the criteria for reporting on a Schedule IV it has not been reported on that schedule.

My business interest in Albo Pest Control was liquidated in a transaction that resulted in small payments being received in January, February & March, 1997. In May, a lump sum payment was received – with funds retained to be sure all taxes and fees were satisfied. A final payment was made in October. The total amount received was $45,859.00.

While it was technically not reportable, I feel compelled to dispel any ambiguity regarding the fact that a previously reported asset no longer appears on Schedule III.

Sincerely,

Tom DeLay
House Majority Whip

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1997

FORM A
For use by Members, officers, and employees

98 JUN -3 PM 4:53

(1)

Peter Russell Deutsch
(Full Name)

PO Box 817689
Hlwd., Fla 33081
(Mailing Address)

Daytime Telephone: 954-437-3936

HAND DELIVERED
(Office Use Only)

Filer Status	☑ Member of the U.S. House of Representatives	State/District: Florida 20	☐ Officer or Employee	Employing Office:	**A *$200 penalty* shall be assessed against anyone who files more than 30 days late.**
Report Type	☑ Annual (May 15)	☐ Amendment	☐ Termination	Termination Date	

PRELIMINARY INFORMATION — ANSWER EACH OF THESE QUESTIONS

I. Did you or your spouse have "earned" income (e.g., salaries or fees) of $200 or more from any source in the reporting period? **If yes, complete and attach Schedule I** — Yes ☐ No ☒

II. Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? **If yes, complete and attach Schedule II.** — Yes ☒ No ☐

III. Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? **If yes, complete and attach Schedule III.** — Yes ☒ No ☐

IV. Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset worth more than $1,000 in the reporting period? **If yes, complete and attach Schedule IV.** — Yes ☒ No ☐

V. Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? **If yes, complete and attach Schedule V.** — Yes ☐ No ☒

VI. Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $250 and not otherwise exempt)? **If yes, complete and attach Schedule VI.** — Yes ☐ No ☒

VII. Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $250 from one source)? **If yes, complete and attach Schedule VII.** — Yes ☒ No ☐

VIII. Did you hold any reportable positions on or before the date of filing in the current calendar year? **If yes, complete and attach Schedule VIII.** — Yes ☐ No ☒

IX. Did you have any reportable agreement or arrangement with an outside entity? **If yes, complete and attach Schedule IX.** — Yes ☐ No ☒

Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION — ANSWER EACH OF THESE QUESTIONS

TRUSTS - Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child? — Yes ☐ No ☒

EXEMPTION - Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption? — Yes ☐ No ☒

CERTIFICATION — THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended. The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct or its designee. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil penalties and criminal sanctions (See 5 U.S.C. app. 4 §104 and 18 U.S.C. §1001).

SIGNATURE OF REPORTING INDIVIDUAL: Pete Deutsch

DATE (Month/Day/Year): 5/16/98

SCHEDULE II — PAYMENTS IN LIEU OF HONORARIA MADE TO CHARITY

List the source, activity (i.e., speech, appearance, or article), date, and amount of any payment made by the sponsor of an event to a charitable organization in lieu of an honorarium. A separate confidential list of charities receiving such payments must be filed directly with the Committee on Standards of Official Conduct. An envelope for transmitting the list is included in each Member's filing package.

Source	Activity	Date	Amount
Examples: Association of American Associations, Wash., D.C. XYZ Magazine	Speech Article	Feb. 2, 1997 Aug. 13, 1997	$2,000 $500
St. John's University, New York, N.Y.	Speech	June 16, 1997	$1,000

This page may be copied if more space is required.

Name *Peter Deutsch* Page *3* of *7*

SCHEDULE III — ASSETS AND "UNEARNED" INCOME

BLOCK A — Asset and/or Income Source
Identify (a) each asset held for investment or production of income with a fair market value exceeding $1,000 at the end of the reporting year, and (b) any other asset or source of in come which generated more than $200 in "unearned" income during the year. For rental property or land, provide an address. Provide full names of any mutual funds. For an IRA or retirement plan that is *self-directed*, list the underlying assets worth more than $1,000. For an IRA or retirement plan that is not selfdirected, name the institution holding the account.

Exclude: Your personal residence(s) (unless there is rental income), any debt owed to you by your spouse, or by your or your spouse's child, parent, or sibling, any deposits totalling $5,000 or less in personal savings accounts, any financial interests in or income derived from U S Government retirement programs.

If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC) or is jointly held (JT), in the optional column on the far left.

BLOCK B — Value of Asset
at close of reporting year. If you use a valuation method other than fair market value, please specify the method used. If an asset was sold and is included only because it generated income, the value should be "None."

BLOCK C — Type of Income

BLOCK D — Amount of Income
For IRA's and retirement plans that are *not* self-directed, you may write in "NA" for income.

BLOCK E — Transaction
Indicate if asset was purchased (P), sold (S), or exchanged (E) in reporting year

SP, DC, JT	Asset and/or Income Source	A None	B $1 – $1,000	C $1,001 – $15,000	D $15,001 – $50,000	E $50,001 – $100,000	F $100,001 – $250,000	G $250,001 – $500,000	H $500,001 – $1,000,000	I $1,000,001 – $5,000,000	J $5,000,001 – $25,000,000	K $25,000,001 – $50,000,000	L Over $50,000,000	DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Type of Income (Specify For Example Partnership Income or Farm Income)	None	I $1 – $200	II $201 – $1,000	III $1,001 – $2,500	IV $2,501 – $5,000	V $5,001 – $15,000	VI $15,001 – $50,000	VII $50,001 – $100,000	VIII $100,001 – $1,000,000	IX $1,000,001 – $5,000,000	X Over $5,000,000	P, S, E
SP (Examples)	Mega Corp Stock					X								X										X								P
DC (Examples)	Simon & Schuster	Indefinite																		Royalties										X		
JT (Examples)	1st Bank of Paducah KY accounts						X									X											X					
	4350 Pine Island Rd, Lauderhill [illegible]						X										X											X				S (part)
	Smith Barney Act, Sunrise Fla. [illegible]	X														X							X									
JT	Merrill Lynch Act, Sunrise Fla.			X												X								X								
	Sunrise, Florida, Mortgage	X														X											X					S
	IRA - Merrill Lynch Money Funds			X												X					n/a											
	IRA - New America High Income Fund				X									X		X	X				n/a											

For additional assets and unearned income, use next page.

SCHEDULE III — ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Name Peter Deutsch | Page 4 of 7

	SP, DC, JT	BLOCK A: Asset and/or Income Source	BLOCK B: Year-End Value of Asset — A: None	B: $1 – $1,000	C: $1,001 – $15,000	D: $15,001 – $50,000	E: $50,001 – $100,000	F: $100,001 – $250,000	G: $250,001 – $500,000	H: $500,001 – $1,000,000	I: $1,000,001 – $5,000,000	J: $5,000,001 – $25,000,000	K: $25,000,001 – $50,000,000	L: Over $50,000,000	BLOCK C: Type of Income — DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Type of Income (Specify)	BLOCK D: Amount of Income — I: None	II: $1 – $200	III: $201 – $1,000	IV: $1,001 – $2,500	V: $2,501 – $5,000	VI: $5,001 – $15,000	VII: $15,001 – $50,000	VIII: $50,001 – $100,000	IX: $100,001 – $1,000,000	X: $1,000,001 – $5,000,000	XI: Over $5,000,000	BLOCK E: Transaction
✓		IRA – Pilgrim Prime Rate Fund			X									X			X	X				1/4											
✓		IRA – Van Kampen Merritt			X									X			?	X				1/4											
✓		IRA – Van Kampen Merritt LTMT Fund				X								X			X	Y				1/4											
✓		IRA – Zenix Income Fund				X								X			X	X				1/4											
✓		IRA – Tiger Sir Fund				X											X	X				1/4											
✓		IRA – John Hancock Spec Opportunities				X								X			X	X				1/4											
✓		IRA – GT Global Health Care			X									X			X	X				1/4											
✓		IRA – GT Global Telecom			X									X			X	X				1/4											
✓		IRA – Oppenheimer Asset Allocation				X								X			X	X				1/4											
✓		IRA – Shield Prices Opp Rept (SPX)			X									X			X	X				1/4											P
✓		Thrift Savings Plan – C Fund					X							X			X	X				1/4											Pledged
✓		1st Union CD			X												X							X										
✓	DC	Guinness Flight China Fund			X									X			X	X						X									P
✓	DC	Janus Worldwide Fund			X									X			X	X						X									P
✓	DC	T. Rowe Price Energy Fund			X									X			X	X						X									P
✓	DC	T. Rowe Price Balanced Fund			X									X			X	X						X									
✓	DC	Smith Barney Act: Ftbwbwbbfr	X														X																
✓	DC	Mortgage, 312 NW 31st Ave, Ftlaud	X														X																
✓	DC	4350 S. Pine Island Rd						X														X											
✓	DC	Am Express International Std					X							X				X						X									
✓	DC	Fidelity, Growth & Income Fund			X									X				X						X									P
✓	DC	Fidelity, Stock Selector Fund			X									X				X						X									P

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SCHEDULE III — ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Name Peter Deutsch | Page 5 of 7

SP, DC, JT	BLOCK A: Asset and/or Income Source	BLOCK B: Year-End Value of Asset — A: None	B: $1 – $1,000	C: $1,001 – $15,000	D: $15,001 – $50,000	E: $50,001 – $100,000	F: $100,001 – $250,000	G: $250,001 – $500,000	H: $500,001 – $1,000,000	I: $1,000,001 – $5,000,000	J: $5,000,001 – $25,000,000	K: $25,000,001 – $50,000,000	L: Over $50,000,000	BLOCK C: Type of Income — DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Type of Income (Specify)	BLOCK D: Amount of Income — I: None	II: $1 – $200	III: $201 – $1,000	IV: $1,001 – $2,500	V: $2,501 – $5,000	VI: $5,001 – $15,000	VII: $15,001 – $50,000	VIII: $50,001 – $100,000	IX: $100,001 – $1,000,000	X: $1,000,001 – $5,000,000	XI: Over $5,000,000	BLOCK E: Transaction — P, S, E
DC	Invesco, Stat Municipal Fund			X										X			X							X							P
DC	Vanguard, Spec Health Fund			X										X			X						X								P
DC	Schwab, 1000 Fund			X										X			X					X									P
DC	OAK Technology, Stock			X										X			X				X										P
DC	Schwab, Florida Municipal Trust						X									X							X								P
SP	IRA: American Bio Medica Corp; Stock			X										^			X				1/4										
SP	IRA: Health Enhancement Systems; Stock			X										X			X				1/4										
SP	IRA: Imp Inc; Stock		X											X			X				1/4										
SP	IRA: Immune Response; Stock			X										X			X				1/4										
SP	IRA: IVAX; Stock		X											X			X				1/4										
SP	IRA: MBLA, Stock			X										X			X				1/4										
SP	IRA: Med plus; Stock		X											X			X				1/4										
SP	IRA: Top Source Technologies; Stock		X											X			X				1/4										
	9505 Flamingo Rd, Miramar, FL	X															X								X						S

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Name Peter Deutsch | Page 6 of 7

SCHEDULE IV — TRANSACTIONS

Report any purchase, sale, or exchange by you, your spouse, or dependent child during the reporting year of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child, or the purchase or sale of your personal residence, unless it is rented out.

SP, DC, JT	Asset	Type of Transaction: PURCHASE	SALE	EXCHANGE	Date (MO/DAY/YR)	Amount of Transaction: B ($1,001–$15,000)	C ($15,001–$50,000)	D ($50,001–$100,000)	E ($100,001–$250,000)	F ($250,001–$500,000)	G ($500,001–$1,000,000)	H ($1,000,001–$5,000,000)	I ($5,000,001–$25,000,000)	J ($25,000,001–$50,000,000)	K (Over $50,000,000)
SP	*Example* Mega Corporation Common Stock	X			10-12-97		X								
	4350 Pine Island Rd., Davie, Fla. (Bonus Purchase)		X		5/10/97		X								
	950 S. Flamingo Rd.; Davie, Fla. (Sale of Trees)		X		6/27/97	X									
	IRA - SPY; Stock	X			10/23/97	X									
SP	IRA - Immune Response, Stock	X			5/21/97	X									
DC	Guinness, Flight China Fund	X			7/8/97	X									
DC	Janus, Worldwide Fund	X			7/8/97	X									
DC	T. Rowe Price, Europe Fund	X			7/8/97	X									
DC	Fidelity, Growth & Income Fund	X			4/18/97	X									
DC	Fidelity, Stock Selector Fund	X			4/18/97	X									
DC	Invesco, Strat. Financial Fund	X			4/18/97	X									
DC	Vanguard, Spec. Health Fund	X			4/18/97	X									
DC	Schwab, 1000 Fund	X			4/17/97	X									
DC	Oak Technology, Stock	X			6/4/97	X									
DC	Schwab, Florida Muni Cash Trust	X			12/18/97				X						

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SCHEDULE VII —TRAVEL PAYMENTS AND REIMBURSEMENTS

Identify the source and list travel itinerary, dates, and nature of expenses provided for travel and travel-related expenses totalling more than $250 received by you, your spouse, or a dependent child during the reporting period. Indicate whether a family member accompanied the traveler at the sponsor's expense, and the amount of time, if any, that was not at the sponsor's expense. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor

Exclude: Travel-related expenses provided by federal, state, and local governments, or by a foreign government required to be separately reported under the Foreign Gifts and Decorations Act (5 U.S.C. § 7342), travel paid for by a Federal political committee; travel provided to a spouse or dependent child that is totally independent of his or her relationship to you.

Source	Date(s)	Point of Departure—Destination—Point of Return	Lodging? (Y/N)	Food? (Y/N)	Was a Family Member Included? (Y/N)	Any time not at sponsor's expense
Examples Chicago Chamber of Commerce	Mar. 2	Wash., D.C.—Chicago—Wash., D.C.	N	N	N	N
Roycroft Corporation	Aug. 6–13	Wash., D.C.—Los Angeles—Cleveland	Y	Y	Y	4 Days
Citizen's Education Foundation, Inc.	1/16-1/19	Miami, Fla.—San Juan, P.R., San Juan, P.R.—Miami, Fla.	Y	Y	Y	N
St. John's University	6/13-6/16	Wash, D.C.—N.Y., N.Y., N.Y., N.Y.—Wash, D.C.	Y	N	N	3 Days

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RECEIVED
LEGISLATIVE RESOURCE CENTER
98 JUN -3 PM 4:53
OFFICE OF THE CLERK
U.S. HOUSE OF REPRESENTATIVES

'97

HAND DELIVERED

Peter Deutsch
P.O. Box 817689
Hollywood, Florida 33081

May 16, 1998

The Clerk of the House
Office of Records and Registration
Cannon House Office Building
Washington, D.C. 20515

MC

Dear Sir,

This letter serves as an amendment to my 1996 Financial Disclosure Statement.

(1)The mortgage on 312 NW 47th Ave.; Plantation, Florida on page 3 in Block B should have been in column "A"; and

(2)The mortgage in Sunrise, Florida on page 4 in Block B should have been in column "A".

Sincerely,

Congressman Peter Deutsch

PRD/jed

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1997

FORM A

For use by Members, officers, and employees

98 MAY 15 PM 3:14

Lincoln Diaz-Balart
(Full Name)

8525 NW 53rd Terrace
(Mailing Address)

Miami, FL 33166

(305) 470-8555
Daytime Telephone

HAND DELIVERED

(Office Use Only)

Filer Status	[X]	Member of the U.S. House of Representatives	State FL District 21	[ ] Officer or Employee	Employing Office
Report Type	[X]	Annual (May 15)	[ ] Amendment	[ ] Termination	Termination Date

A *$200 penalty* shall be assessed against anyone who files more than 30 days late.

PRELIMINARY INFORMATION — ANSWER EACH OF THESE QUESTIONS

I	Did you or your spouse have "earned" income (e.g., salaries or fees) of $200 or more from any source in the reporting period? **If yes, complete and attach Schedule I.**	Yes [X]	No [ ]	VI Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $250 and not otherwise exempt)? **If yes, complete and attach Schedule VI.**	Yes [ ]	No [X]
II	Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? **If yes, complete and attach Schedule II.**	Yes [ ]	No [X]	VII Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $250 from one source)? **If yes, complete and attach Schedule VII.**	Yes [ ]	No [ ]
III	Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? **If yes, complete and attach Schedule III.**	Yes [X]	No [ ]	VIII Did you hold any reportable positions on or before the date of filing in the current calendar year? **If yes, complete and attach Schedule VIII.**	Yes [ ]	No [X]
IV	Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset worth more than $1,000 in the reporting period? **If yes, complete and attach Schedule IV.**	Yes [X]	No [ ]	IX Did you have any reportable agreement or arrangement with an outside entity? **If yes, complete and attach Schedule IX.**	Yes [ ]	No [X]
V	Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? **If yes, complete and attach Schedule V.**	Yes [X]	No [ ]	**Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.**		

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION — ANSWER EACH OF THESE QUESTIONS

TRUSTS—Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child?	Yes [ ]	No [X]
EXEMPTION—Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption?	Yes [ ]	No [X]

CERTIFICATION — THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended. The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct or its designee. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil penalties and criminal sanctions (*See* 5 U.S.C. app. 4, §104 and 18 U.S.C. §1001)

SIGNATURE OF REPORTING INDIVIDUAL: Lincoln Diaz-Balart

DATE (Month/Day/Year): 5-14-98

Name	Lincoln Diaz-Balart	Page 2 of 9

SCHEDULE I — EARNED INCOME

List the source, type, and amount of earned income from any source (other than the filer's current employment by the U.S. Government) totalling $200 or more during the preceding calendar year. For a spouse, list the source and amount of any honoraria, list only the source for other spouse earned income exceeding $1,000.

Source	Type	Amount
Examples Keene State	Approved Teaching Fee	$6,000
State of Maryland	Legislative Pension	$9,000
Civil War Roundtable (Oct 2nd)	Spouse Speech	$1,000
Ontario County Board of Education	Spouse Salary	NA
Hamilton Bank, N.A. Miami, FL	spouse salary	NA

For payments to charity in lieu of honoraria, use Schedule II.

SCHEDULE II — PAYMENTS IN LIEU OF HONORARIA MADE TO CHARITY

List the source, activity (i.e., speech, appearance, or article), date, and amount of any payment made by the sponsor of an event to a charitable organization in lieu of an honorarium. A separate confidential list of charities receiving such payments must be filed directly with the Committee on Standards of Official Conduct. An envelope for transmitting the list is included in each Member's filing package.

Source	Activity	Date	Amount
Examples: Association of American Associations, Wash., D.C.	Speech	Feb. 2, 1997	$2,000
XYZ Magazine	Article	Aug. 13, 1997	$500
N/A			

This page may be copied if more space is required.

SCHEDULE III — ASSETS AND "UNEARNED" INCOME

Name: Lincoln Diaz-Balart | Page 4 of 9

BLOCK A — Asset and/or Income Source

Identify (a) each asset held for investment or production of income with a fair market value exceeding $1,000 at the end of the reporting year, and (b) any other asset or source of income which generated more than $200 in "unearned" income during the year. For rental property or land, provide an address. Provide full names of any mutual funds. For an IRA or retirement plan that is *self-directed*, list the underlying assets worth more than $1,000. For an IRA or retirement plan that is not self-directed, name the institution holding the account.

Exclude: Your personal residence(s) (unless there is rental income), any debt owed to you by your spouse, or by your or your spouse's child, parent, or sibling; any deposits totalling $5,000 or less in personal savings accounts; any financial interests in or income derived from U.S. Government retirement programs.

If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC) or is jointly held (JT), in the optional column on the far left.

BLOCK B — Value of Asset

at close of reporting year. If you use a valuation method other than fair market value, please specify the method used. If an asset was sold and is included only because it generated income, the value should be "None."

BLOCK C — Type of Income

BLOCK D — Amount of Income

For IRA's and retirement plans that are *not* self-directed, you may write in "NA" for income.

BLOCK E — Transaction

Indicate if asset was purchased (P), sold (S), or exchanged (E) in reporting year.

	BLOCK A	B	C	D	E
		Value of Asset	Type of Income	Amount of Income	Transaction
SP	Examples: Mega Corp. Stock	Indefinite	DIVIDENDS: X		P
DC	Simon & Schuster				
JT	1st Bank of Paducah, KY accounts		INTEREST: X		
			Royalties: X		
	6920 SW 94 Avenue				
JT	Miami, FL 33173				
JT	900 N. Stafford				
	Arlington, VA				
	Fidelity Puritan Fund	C: X	DIVIDENDS: X	N/A - IRA	
	The New England	C: X	DIVIDENDS: X	IV: X	
	(Life Insurance Policy)				
SP	Phillips Petroleum	C: X	DIVIDENDS: X	I: X	
	(Common Stock)				
SP	AG Edwards & Sons	C: X	INTEREST: X	IV: X	

For additional assets and unearned income, use next page.

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SCHEDULE III — ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Name Lincoln Diaz-Balart | Page 5 of 9

SP, DC, JT	BLOCK A: Asset and/or Income Source	BLOCK B: Year-End Value of Asset												BLOCK C: Type of Income							BLOCK D: Amount of Income											BLOCK E: Transaction
		A None	B $1 – $1,000	C $1,001 – $15,000	D $15,001 – $50,000	E $50,001 – $100,000	F $100,001 – $250,000	G $250,001 – $500,000	H $500,001 – $1,000,000	I $1,000,001 – $5,000,000	J $5,000,001 – $25,000,000	K $25,000,001 – $50,000,000	L Over $50,000,000	DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Type of Income (Specify)	I None	II $1 – $200	III $201 – $1,000	IV $1,001 – $2,500	V $2,501 – $5,000	VI $5,001 – $15,000	VII $15,001 – $50,000	VIII $50,001 – $100,000	IX $100,001 – $1,000,000	X $1,000,001 – $5,000,000	XI Over $5,000,000	P, S, E
SP	Citibank Savings			X												X							X								
	Lincoln Mark VII (car)			X																											

This page may be copied if more space is required.

SCHEDULE IV — TRANSACTIONS

Name: Lincoln Diaz-Balart | Page 6 of 9

Report any purchase, sale, or exchange by you, your spouse, or dependent child during the reporting year of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child, or the purchase or sale of your personal residence, unless it is rented out.

SP, DC, JT	Asset	Type of Transaction: PURCHASE	SALE	EXCHANGE	Date (MO/DAY/YR)	Amount of Transaction: B ($1,001–$15,000)	C ($15,001–$50,000)	D ($50,001–$100,000)	E ($100,001–$250,000)	F ($250,001–$500,000)	G ($500,001–$1,000,000)	H ($1,000,001–$5,000,000)	I ($5,000,001–$25,000,000)	J ($25,000,001–$50,000,000)	K (Over $50,000,000)
SP	*Example* Mega Corporation Common Stock	x			10-12-97		x								
SP	Coorespondent Services Corp. (IRA)		x		1-28-97	x									
SP	AG Edwards & Sons (IRA) (Rollover)	X				x									

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SCHEDULE V — LIABILITIES

Report liabilities of over $10,000 owed to any one creditor ***at any time*** during the reporting period by you, your spouse, or dependent child. Mark the highest amount owed during the year. **Exclude:** Any mortgage on your personal residence (unless it is rented out), loans secured by automobiles, household furniture, or appliances, and liabilities owed to a spouse, or the child, parent, or sibling of you or your spouse. Report ***revolving charge accounts*** only if the balance at the end of the reporting period exceeded $10,000. [1]

SP, DC, JT	Creditor	Type of Liability	Amount of Liability									
			B $10,001–$15,000	C $15,001–$50,000	D $50,001–$100,000	E $100,001–$250,000	F $250,001–$500,000	G $500,001–$1,000,000	H $1,000,001–$5,000,000	I $5,000,001–$25,000,000	J $25,000,001–$50,000,000	K Over $50,000,000
	Example First Bank of Wilmington, Delaware	Mortgage on 123 Main St., Dover, Del				x						
JT	Republic Bank	Mortgage on 6920 SW 94 Ave. Miami, FL				x						
JT	GMAC Mortgage	Mortgage on 900 N. Stafford Arlington, VA			x							
JT	Barnett Bank	Line of Credit	x									

SCHEDULE VI — GIFTS

Report the source, a brief description, and the value of all gifts totalling more than $250 received by you, your spouse, or a dependent child from any source during the year.

Exclude: Gifts from relatives, gifts of personal hospitality of an individual, local meals, and gifts to a spouse or dependent child that are totally independent of his or her relationship to you. Gifts with a value of $100 or less need not be added towards the $250 disclosure threshold.

Note: The gift rule (House Rule 51) prohibits gifts except as specifically provided in the rule

Source	Description	Value
Example: Mr. Joseph H. Smith, Anytown, Anystate	Silver Platter (determination on personal friendship received from Committee on Standards)	$270

Use additional sheets if more space is required.

Name Lincoln Diaz-Balart | Page 8 of 9

SCHEDULE VII —TRAVEL PAYMENTS AND REIMBURSEMENTS

Identify the source and list travel itinerary, dates, and nature of expenses provided for travel and travel-related expenses totalling more than $250 received by you, your spouse, or a dependent child during the reporting period. Indicate whether a family member accompanied the traveler at the sponsor's expense, and the amount of time, if any, that was not at the sponsor's expense. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor.

Exclude: Travel-related expenses provided by federal, state, and local governments, or by a foreign government required to be separately reported under the Foreign Gifts and Decorations Act (5 U.S.C. § 7342); travel paid for by a Federal political committee; travel provided to a spouse or dependent child that is totally independent of his or her relationship to you.

	Source	Date(s)	Point of Departure—Destination—Point of Return	Lodging? (Y/N)	Food? (Y/N)	Was a Family Member Included? (Y/N)	Any time not at sponsor's expense
Examples	Chicago Chamber of Commerce	Mar. 2	Wash., D.C.—Chicago—Wash., D.C.	N	N	N	N
	Roycroft Corporation	Aug. 6–13	Wash., D.C.—Los Angeles—Cleveland	Y	Y	Y	4 Days
	Humanitarian relief mission Miami Air Lease	Aug.23	Miami-Nassau, Bahamas-Miami	N	N	N	Y

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SCHEDULE VIII — POSITIONS

Report all positions, compensated or uncompensated, held during the current calendar year as an officer, director, trustee of an organization, partner, proprietor, representative, employee, or consultant of any corporation, firm, partnership, or other business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States.

Exclude: Positions held in any religious, social, fraternal, or political entities; positions solely of an honorary nature; and positions listed on Schedule I.

Position	Name of Organization

SCHEDULE IX — AGREEMENTS

Identify the date, parties to, and general terms of any agreement or arrangement with respect to: future employment; a leave of absence during the period of government service; continuation or deferral of payments by a former or current employer other than the U.S. Government; or continuing participation in an employee welfare or benefit plan maintained by a former employer.

Date	Parties To	Terms of Agreement

GPO 1998 46–260 (mac)

Use additional sheets if more space is required.

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1997

FORM A
For use by Members, officers, and employees

RECEIVED
93 MAY 18 PM 3 06
OFFICE OF THE CLERK
HOUSE OF REPRESENTATIVES

MAY 12 1998 (8)
ML
(Office Use Only)

Jay W Dickey, Jr.
(Full Name)
#47 Southern Pines; Pine Bluff, AR 71603 (202)225 3772
(Mailing Address) Daytime Telephone

Filer Status
- [X] Member of the U S House of Representatives — State Arkansas District 4th
- [ ] Officer or Employee — Employing Office

Report Type
- [X] Annual (May 15)
- [ ] Amendment
- [ ] Termination — Termination Date

A *$200 penalty* shall be assessed against anyone who files more than 30 days late.

PRELIMINARY INFORMATION — ANSWER EACH OF THESE QUESTIONS

I Did you or your spouse have "earned" income (e g , salaries or fees) of $200 or more from any source in the reporting period? **If yes, complete and attach Schedule I.** — Yes [ ] No [X]

II Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? **If yes, complete and attach Schedule II.** — Yes [ ] No [X]

III Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? **If yes, complete and attach Schedule III.** — Yes [X] No [ ]

IV Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset worth more than $1,000 in the reporting period? **If yes, complete and attach Schedule IV.** — Yes [X] No [ ]

V Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? **If yes, complete and attach Schedule V.** — Yes [X] No [ ]

VI Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i e , aggregating more than $250 and not otherwise exempt)? **If yes, complete and attach Schedule VI.** — Yes [ ] No [X]

VII Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $250 from one source)? **If yes, complete and attach Schedule VII.** — Yes [ ] No [X]

VIII Did you hold any reportable positions on or before the date of filing in the current calendar year? **If yes, complete and attach Schedule VIII.** — Yes [X] No [ ]

IX Did you have any reportable agreement or arrangement with an outside entity? **If yes, complete and attach Schedule IX.** — Yes [ ] No [X]

Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION — ANSWER EACH OF THESE QUESTIONS

TRUSTS—Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child? — Yes [ ] No [X]

EXEMPTION—Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption? — Yes [ ] No [X]

CERTIFICATION — THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended. The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct or its designee Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil penalties and criminal sanctions (*See* 5 U S C app 4, §104 and 18 U S C §1001).

SIGNATURE OF REPORTING INDIVIDUAL: Jay W. Dickey Jr.

DATE (Month/Day/Year): 5/11/98

Name Jay W. Dickey, Jr. | Page 2 of 8

SCHEDULE III — ASSETS AND "UNEARNED" INCOME

BLOCK A — Asset and/or Income Source

Identify (a) each asset held for investment or production of income with a fair market value exceeding $1,000 at the end of the reporting year, and (b) any other asset or source of income which generated more than $200 in "unearned" income during the year. For rental property or land, provide an address. Provide full names of any mutual funds. For an IRA or retirement plan that is *self-directed*, list the underlying assets worth more than $1,000. For an IRA or retirement plan that is not selfdirected, name the institution holding the account.

Exclude: Your personal residence(s) (unless there is rental income); any debt owed to you by your spouse, or by your or your spouse's child, parent, or sibling; any deposits totalling $5,000 or less in personal savings accounts; any financial interests in or income derived from U.S. Government retirement programs.

If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC) or is jointly held (JT), in the optional column on the far left

BLOCK B — Value of Asset

at close of reporting year.
If you use a valuation method other than fair market value, please specify the method used
If an asset was sold and is included only because it generated income, the value should be "None."

BLOCK C — Type of Income

BLOCK D — Amount of Income

For IRA's and retirement plans that are *not* self-directed, you may write in "NA" for income.

BLOCK E — Transaction

Indicate if asset was purchased (P), sold (S), or exchanged (E) in reporting year

	BLOCK A	BLOCK B												BLOCK C							BLOCK D										BLOCK E
		A None	B $1 – $1,000	C $1,001 – $15,000	E $15,001 – $50,000	F $50,001 – $100,000	G $100,001 – $250,000	H $250,001 – $500,000	I $500,001 – $1,000,000	J $1,000,001 – $5,000,000	K $5,000,001 – $25,000,000	L $25,000,001 – $50,000,000	Over $50,000,000	DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Type of Income (Specify. For Example, Partnership Income or Farm Income)	I None	II $1 – $200	III $201 – $1,000	IV $1,001 – $2,500	V $2,501 – $5,000	VI $5,001 – $15,000	VII $15,001 – $50,000	VIII $50,001 – $100,000	IX $100,001 – $1,000,000	X $1,000,001 – $5,000,000	XI Over $5,000,000	P, S, E
SP					X									X																	P
DC	*Examples*		Indefinite																	Royalties											
JT						X										X										X					
	Wal-Mart Stores, Inc. Stock					X								X										X							S
	Dickey Law Firm, PA Stock						X	X							X											X					
	Leasehold Interest in Cottage Ludington, MI						X								X											X					
	Metropolitan Life Ins. Annuity (744 Shares of Wal-Mart Stock)			X												X							X								
	Self-Directed IRA - Nations				X									X	X	X								X							
	Land at 512 W. 27th Pine Bluff, AR					X									X							X									

For additional assets and unearned income, use next page.

SCHEDULE III — ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Name Jay H. Dickey, Jr. | Page 3 of 8

SP / DC / JT	BLOCK A: Asset and/or Income Source	BLOCK B: Year-End Value of Asset												BLOCK C: Type of Income							BLOCK D: Amount of Income										BLOCK E: Transaction
		A None	B $1 - $1,000	C $1,001 - $15,000	D $15,001 - $50,000	E $50,001 - $100,000	F $100,001 - $250,000	G $250,001 - $500,000	H $500,001 - $1,000,000	I $1,000,001 - $5,000,000	J $5,000,001 - $25,000,000	K $25,000,001 - $50,000,000	L Over $50,000,000	DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Type of Income (Specify)	I None	II $1 - $200	III $201 - $1,000	IV $1,001 - $2,500	V $2,501 - $5,000	VI $5,001 - $15,000	VII $15,001 - $50,000	VIII $50,001 - $100,000	IX $100,001 - $1,000,000	X $1,000,001 - $5,000,000	XI Over $5,000,000	P, S, E
	1/2 Interest in land + Bldg at 502 + Walnut Pine Bluff, AR 1.52 acres lot on Blake + Mitchell Streets Pine Bluff, AR					X									X									X							
	GRQ, Inc - Notes Receivable	X				X										X					X				X						S

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Name Jay W. Dickey, Jr. | Page 4 of 8

SCHEDULE IV — TRANSACTIONS

SP, DC, JT	Asset	Type of Transaction: PURCHASE	SALE	EXCHANGE	Date (MO/DAY/YR)	Amount of Transaction: B ($1,001–$15,000)	C ($15,001–$50,000)	D ($50,001–$100,000)	E ($100,001–$250,000)	F ($250,001–$500,000)	G ($500,001–$1,000,000)	H ($1,000,001–$5,000,000)	I ($5,000,001–$25,000,000)	J ($25,000,001–$50,000,000)	K (Over $50,000,000)
SP	*Example.* Mega Corporation Common Stock	X			10–12–97		X								
	Wal-Mart Stores, Inc. Stock		X		09-09-97					X					
	GBQ, Inc Stock (Assets Sold)		X		07-23-97					X					
	1.09 acres lot at Blake & Mitchell Streets * Pine Bluff, AR		X		07-23-97										
	Land located at 2800 block Olive Streets * Pine Bluff, AR		X		07-23-97			X							
	Partial Intrest in 64 acres land Jefferson County, AR		X		08-20-97		X								

*These properties secured the mortgage of GBQ, Inc. These properties were then transferred to the new owner of GBQ, Inc's assets on 7/23/97.

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SCHEDULE V — LIABILITIES

Report liabilities of over $10,000 owed to any one creditor ***at any time*** during the reporting period by you, your spouse, or dependent child. Mark the highest amount owed during the year. **Exclude:** Any mortgage on your personal residence (unless it is rented out), loans secured by automobiles, household furniture, or appliances, and liabilities owed to a spouse, or the child, parent, or sibling of you or your spouse. Report ***revolving charge accounts*** only if the balance at the end of the reporting period exceeded $10,000.

SP, DC, JT	Creditor	Type of Liability	Amount of Liability									
			B $10,001 – $15,000	C $15,001 – $50,000	D $50,001 – $100,000	E $100,001 – $250,000	F $250,001 – $500,000	G $500,001 – $1,000,000	H $1,000,001 – $5,000,000	I $5,000,001 – $25,000,000	J $25,000,001 – $50,000,000	K Over $50,000,000
Example	First Bank of Wilmington, Delaware	Mortgage on 123 Main St., Dover, Del				X						
	Betty C. Dickey Pine Bluff, AR	Mortgage on 2710 Olive, Pine Bluff			X							
	Betty C. Dickey Pine Bluff, AR	Unsecured Note		X								
	GRG, Inc. Pine Bluff, AR	Unsecured Note					X					
	Simmons First Nat'l Bank Pine Bluff, AR	Line of Credit Secured by Wal Mart Stores, Inc Stock		X								
	Simmons First Nat'l Bank Pine Bluff, AR	Unsecured Note	X									

SCHEDULE VI — GIFTS

Report the source, a brief description, and the value of all gifts totalling more than $250 received by you, your spouse, or a dependent child from any source during the year.

Exclude: Gifts from relatives, gifts of personal hospitality of an individual, local meals, and gifts to a spouse or dependent child that are totally independent of his or her relationship to you. Gifts with a value of $100 or less need not be added towards the $250 disclosure threshold.

Note: The gift rule (House Rule 51) prohibits gifts except as specifically provided in the rule.

Source	Description	Value
Example: Mr. Joseph H. Smith, Anytown, Anystate	Silver Platter (determination on personal friendship received from Committee on Standards)	$270

Use additional sheets if more space is required.

SCHEDULE V — LIABILITIES

Report liabilities of over $10,000 owed to any one creditor ***at any time*** during the reporting period by you, your spouse, or dependent child. Mark the highest amount owed during the year **Exclude:** Any mortgage on your personal residence (unless it is rented out); loans secured by automobiles, household furniture, or appliances; and liabilities owed to a spouse, or the child, parent, or sibling of you or your spouse. Report ***revolving charge accounts*** only if the balance at the end of the reporting period exceeded $10,000.

SP, DC, JT	Creditor	Type of Liability	Amount of Liability									
			B $10,001–$15,000	C $15,001–$50,000	D $50,001–$100,000	E $100,001–$250,000	F $250,001–$500,000	G $500,001–$1,000,000	H $1,000,001–$5,000,000	I $5,000,001–$25,000,000	J $25,000,001–$50,000,000	K Over $50,000,000
	Example. First Bank of Wilmington, Delaware	Mortgage on 123 Main St., Dover, Del				X						
	Dickey Law Firm, P.A. Pine Bluff, AR	Unsecured Note					X					
	Nations Bank Pine Bluff, AR	Line of Credit Secured by Wal-Mart Stores, Inc Stock			X							
	Bank of Bearden Bearden, AR	Unsecured Line of Credit		X								
	Fred + Mrs. Russell Condray Pine Bluff, AR	Unsecured Note			X							

SCHEDULE VI — GIFTS

Report the source, a brief description, and the value of all gifts totalling more than $250 received by you, your spouse, or a dependent child from any source during the year

Exclude: Gifts from relatives, gifts of personal hospitality of an individual, local meals, and gifts to a spouse or dependent child that are totally independent of his or her relationship to you. Gifts with a value of $100 or less need not be added towards the $250 disclosure threshold.

Note: The gift rule (House Rule 51) prohibits gifts except as specifically provided in the rule

Source	Description	Value
Example Mr. Joseph H. Smith, Anytown, Anystate	Silver Platter (determination on personal friendship received from Committee on Standards)	$270

Use additional sheets if more space is required.

SCHEDULE VII —TRAVEL PAYMENTS AND REIMBURSEMENTS

Identify the source and list travel itinerary, dates, and nature of expenses provided for travel and travel-related expenses totalling more than $250 received by you, your spouse, or a dependent child during the reporting period. Indicate whether a family member accompanied the traveler at the sponsor's expense, and the amount of time, if any, that was not at the sponsor's expense. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor.

Exclude: Travel-related expenses provided by federal, state, and local governments, or by a foreign government required to be separately reported under the Foreign Gifts and Decorations Act (5 U.S.C. § 7342); travel paid for by a Federal political committee; travel provided to a spouse or dependent child that is totally independent of his or her relationship to you.

Source	Date(s)	Point of Departure—Destination—Point of Return	Lodging? (Y/N)	Food? (Y/N)	Was a Family Member Included? (Y/N)	Any time not at sponsor's expense
Examples: Chicago Chamber of Commerce	Mar. 2	Wash., D.C.—Chicago—Wash., D.C.	N	N	N	N
Roycroft Corporation	Aug. 6–13	Wash., D.C.—Los Angeles—Cleveland	Y	Y	Y	4 Days
The One Hundred	Nov. 27-30	LittleRock-Ft Lauderdale-LittleRock	Y	Y	N	N

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SCHEDULE VIII — POSITIONS

Report all positions, compensated or uncompensated, held during the current calendar year as an officer, director, trustee of an organization, partner, proprietor, representative, employee, or consultant of any corporation, firm, partnership, or other business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States.

Exclude: Positions held in any religious, social, fraternal, or political entities; positions solely of an honorary nature; and positions listed on Schedule I.

Position	Name of Organization
Director	Dickey Law Firm, P.A.
Director	GRQ, Inc.

SCHEDULE IX — AGREEMENTS

Identify the date, parties to, and general terms of any agreement or arrangement with respect to: future employment; a leave of absence during the period of government service; continuation or deferral of payments by a former or current employer other than the U.S. Government, or continuing participation in an employee welfare or benefit plan maintained by a former employer.

Date	Parties To	Terms of Agreement

Use additional sheets if more space is required.

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1997

Form A
For use by Members, officers, and employees

RECEIVED
98 MAY 14 PM 12:45
CLERK'S OFFICE
U.S. HOUSE OF REPRESENTATIVES

NORMAN D DICKS
(Full Name)

2467 RAYBURN HOB
(Mailing Address)

WASHINGTON DC 20515

Daytime Telephone
202-225-5916

HAND DELIVERED
(Office Use Only)

6

Filer Status	[X] Member of the U S House of Representatives	State WA District 06	[ ] Officer or Employee	Employing Office	A $200 penalty shall be assessed against anyone who files more than 30 days late.
Report Type	[X] Annual (May 15)	[ ] Amendment		[ ] Termination Termination Date	

PRELIMINARY INFORMATION -- ANSWER EACH OF THESE QUESTIONS

I Did you or your spouse have "earned" income (e g , salaries or fees) of $200 or more from any source in the reporting period? **If yes, complete and attach Schedule I.**	Yes [X]	No [ ]	VI Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i e , aggregating more than $250 and not otherwise exempt)? **If yes, complete and attach Schedule VI.**	Yes [ ]	No [X]
II Did any individual or organization make a donation to charity in lieu of paying you for a speech, apppearance, or article in the reporting period? **If yes, complete and attach Schedule II.**	Yes [ ]	No [X]	VII Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $250 from one source)? **If yes, complete and attach Schedule VII.**	Yes [X]	No [ ]
III Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? **If yes, complete and attach Schedule III.**	Yes [X]	No [ ]	VIII Did you hold any reportable positions on or before the date of filing in the current calendar year? **If yes, complete and attach Schedule VIII.**	Yes [ ]	No [X]
IV Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset worth more than $1,000 in the reporting period? **If yes, complete and attach Schedule IV.**	Yes [X]	No [ ]	IX Did you have any reportable agreement or arrangement with an outside entity? **If yes, complete and attach Schedule IX.**	Yes [ ]	No [X]
V Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? **If yes, complete and attach Schedule V.**	Yes [ ]	No [X]	Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.		

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION -- ANSWER EACH OF THESE QUESTIONS

TRUSTS- Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child? (See Instructions, pages 10-11.)	Yes [ ]	No [X]
EXEMPTION Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption? (See Instructions, page 11)	Yes [ ]	No [X]

CERTIFICATION -- THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct or its designee Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil penalties and criminal sanctions (See 5 U S C app 4, 104 and 18 U S C 1001)

SIGNATURE OF REPORTING INDIVIDUAL: Norman D. Dicks

DATE (Month/Day/Year): 5/13/98

940

Name NORMAN D DICKS	Page ___ of __

SCHEDULE I -- EARNED INCOME

List the source, type, and amount of earned income from any source (other than the filer's current employment by the U S Government) totalling $200 or more during the preceding calendar year For a spouse, list the source and amount of any honoraria, list only the source for other spouse earned income exceeding $1,000 For further information, see Instructions, pages 12-13

	Source	Type	Amount
Examples	Keene State	Approved Teaching Fee	$10,000
	State of Maryland	Legislative Pension	$9,000
	Civil War Roundtable (Oct 2nd)	Spouse Speech	$1,000
	Ontario County Board of Education	Spouse Salary	NA
	US CAPITOL HISTORICAL SOCIETY	SPOUSE SALARY	NA

For payments to charity in lieu of honoraria, use Schedule II.

SCHEDULE III -- ASSETS AND "UNEARNED" INCOME

BLOCK A **Asset and/or Income Source** Identify (a) each asset held for investment or production of income with a fair market value exceeding $1,000 at the end of the reporting year, and (b) any other asset or source of income which generated more than $200 in "unearned" income during the year. For rental property or land, provide an address. Provide full names of any mutual funds. For an IRA or retirement plan that is *self-directed,* list the underlying assets worth more than $1,000. For an IRA or retirement plan that is *not* self-directed, name the institution holding the account. **Exclude:** Your personal residence(s) (unless there is rental income); any debt owed to you by your spouse, or by your or your spouse's child, parent, or sibling; any deposits totalling $5,000 or less in personal savings accounts; any financial interests in or income derived from U.S. Government retirement programs. If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC) or is jointly held (JT), in the optional column on the far left. For further information, see Instructions, pages 14-20	BLOCK B **Value of Asset** at close of reporting year If you use a valuation method other than fair market value, please specify the method used. If an asset was sold and is included only because it generated income, the value should be "None."	BLOCK C **Type of Income** If other than one of the listed categories, specify the type of income by writing a brief description in this block	BLOCK D **Amount of Income** For IRA's and retirement plans that are *not* self-directed, you may write in "NA" for income.	BLOCK E **Transaction** Indicate if asset was purchased(P), sold(S), or exchanged(E) in reporting year.
SP DC JT *Examples*	SP Mega Corp Stock 123 Main St , Dover, Del 1st Bank of Paducah, KY accounts	$15,001 - $50,000 $250,001 - $500,000 $50,001 - $100,000	Dividends Rent Interest	$201 - $1,000 $1,001 - $2,500 $5,001 - $15,000	P
JT	924 SHOREWOOD DR, BREMERTON, WA	$50,001 - $100,000	Rent	$1,001 - $2,500	
SP	Massachusetts Mutual Life Ins, Springfield, MA IRA	$15,001 - $50,000	NA	None	NA
	Massachusetts Mutual Life Ins, Springfield, MA IRA	$15,001 - $50,000	NA	None	NA
SP	Lincoln Life, P.O. Box 2340, Fort Wayne, IN 46801 Annuity	$1,001 - $15,000	NA	None	NA
	Allianz Life Ins Of North America, Minneapolis, MN IRA	$1,001 - $15,000	NA	None	E

SCHEDULE III -- ASSETS AND "UNEARNED" INCOME

SP	Allianz Life Ins Of North America, Minneapolis, MN IRA	$1,001 - $15,000	NA	None	E
DC	National Bank of Bremerton, Bremerton, WA	$1,001 - $15,000	Interest	$201 - $1,000	NA

Name NORMAN D DICKS	Page ____ of ____

SCHEDULE IV -- TRANSACTIONS

Report any purchase, sale, or exchange by you, your spouse, or dependent child during the reporting year of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child, or the purchase or sale of your personal residence, unless it is rented out. For further information, see Instructions, pages 20-21

SP,DC,JT	Asset	Type of Transaction	Date	Amount of Transaction
	Example. Mega Corporation Common Stock	Purchase	10/12/94	$15,001 - $50,000
	Allianz Life Ins Of North America, Minneapolis, MN to Massachusetts Mutual Life Ins, Springfield, MA IRA	Exchange	5-12-97	$1,001 - $15,000
SP	Allianz Life Ins of North America, Minneapolis, MN to Massachusetts Mutual Life Ins, Springfield, MA IRA	Exchange	5-12-97	$1,001 - $15,000

Name NORMAN D DICKS	Page ____ of ____

SCHEDULE VII -- TRAVEL PAYMENTS AND REIMBURSEMENTS

Identify the source and list travel itinerary, dates, and nature of expenses provided for travel and travel-related expenses totalling more than $250 received by you, your spouse, or a dependent child during the reporting period. Indicate whether a family member accompanied the traveler at the sponsor's expense, and the amount of time, if any, that was not at the sponsor's expense. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor.
Exclude: Travel-related expenses provided by federal, state and local governments, or by a foreign government required to be separately reported under the Foreign Gifts and Decorations Act (5 U.S.C. 7342); travel paid for by a Federal political committee; travel provided to a spouse or dependent child that is totally independent of his or her relationship to you. For further information, see Instructions, pages 24-26.

Source	Date(s)	Point of Departure--Destination--Point of Return	Lodging? (Y/N)	Food? (Y/N)	Was a Family Member Included? (Y/N)	Any time<u>not</u> at sponsor's expense
Examples Chicago Chamber of Commerce	Mar 2	Wash , D C -Chicago-Wash , D C	N	N	N	N
Mega Corporation	Aug.6-13	Wash , D C -Los Angeles-Cleveland	Y	Y	Y	4 Days
Defenders of Wildlife, To view progress of wolf reintroduction project	1-13-97 - 1-15-97	DC-Ottowa,Canada, Algonquin Park-DC	Y	Y	N	NA
Aspen Institute, Bipartisian Congressional Retreat	3-7-98 - 3-8-97	DC-Hershey,PA-DC Drove own car	Y	Y	Y	NA

JOHN D. DINGELL
16TH DISTRICT, MICHIGAN
RANKING MEMBER
COMMITTEE ON COMMERCE
CO-CHAIR
HOUSE GREAT LAKES TASK FORCE
MEMBER
MIGRATORY BIRD CONSERVATION COMMISSION

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House of Representatives
Washington, DC 20515-2216

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(202) 225-4071

DISTRICT OFFICES
5465 SCHAEFER ROAD
DEARBORN, MI 48126-3277
(313) 846-1276

23 EAST FRONT STREET
SUITE 103
MONROE, MI 48161-2228
(313) 243-1849

May 14, 1998

(12)

Ms. Robin Carle
Clerk of the House
U.S. House of Representatives
Washington, D.C. 20515

MC

Dear Ms. Carle:

Enclosed please find my financial disclosure statement for calendar year 1997. In completing the form this year, I have included, on Schedule III, the General Motors Corporation stock options that my wife receives as part of her compensation package from her employer. Since the law does not generally require disclosure of the details of a spouse's compensation, I had not previously disclosed the stock options in particular, although I have always appropriately disclosed the fact of her employment by General Motors. It is not clear to me whether the law actually requires me to disclose these stock options, but in an effort to be fully forthcoming, I do so. She has been receiving them as part of her compensation package for a number of years. If this requires amending filings for previous years, please contact me.

Thank you very much.

With every good wish,

Sincerely yours,

John D. Dingell
Member of Congress

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UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1997

Form A
For use by Members, officers, and employees

John D Dingell
(Full Name)

2328 Rayburn H O B
(Mailing Address)

Washington DC 20515

Daytime Telephone 202-225-4071

(Office Use Only)

Filer Status	[X] Member of the U S House of Representatives	State MI District 16	[ ] Officer or Employee	Employing Office	**A $200 penalty shall be assessed against anyone who files more than 30 days late.**
Report Type	[X] Annual (May 15)	[ ] Amendment	[ ] Termination	Termination Date	

PRELIMINARY INFORMATION -- ANSWER EACH OF THESE QUESTIONS

I Did you or your spouse have "earned" income (e g , salaries or fees) of $200 or more from any source in the reporting period?
If yes, complete and attach Schedule I. Yes [X] No [ ]

II Did any individual or organization make a donation to charity in lieu of paying you for a speech, apppearance, or article in the reporting period?
If yes, complete and attach Schedule II. Yes [X] No [ ]

III Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period?
If yes, complete and attach Schedule III. Yes [X] No [ ]

IV Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset worth more than $1,000 in the reporting period?
If yes, complete and attach Schedule IV. Yes [X] No [ ]

V Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period?
If yes, complete and attach Schedule V. Yes [ ] No [X]

VI Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i e , aggregating more than $250 and not otherwise exempt)?
If yes, complete and attach Schedule VI. Yes [ ] No [X]

VII Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $250 from one source)?
If yes, complete and attach Schedule VII. Yes [X] No [ ]

VIII Did you hold any reportable positions on or before the date of filing in the current calendar year?
If yes, complete and attach Schedule VIII. Yes [ ] No [X]

IX Did you have any reportable agreement or arrangement with an outside entity?
If yes, complete and attach Schedule IX. Yes [ ] No [X]

Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION -- ANSWER EACH OF THESE QUESTIONS

TRUSTS--Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child? (See Instructions, pages 10-11) Yes [ ] No [X]

EXEMPTION Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption? (See instructions, page 11) Yes [X] No [ ]

CERTIFICATION -- THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct or its designee Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil penalties and criminal sanctions (See 5 U S C app 4, 104 and 18 U S C 1001)

SIGNATURE OF REPORTING INDIVIDUAL

DATE (Month/Day/Year) May 14 1998

947

SCHEDULE I -- EARNED INCOME

List the source, type, and amount of earned income from any source (other than the filer's current employment by the U.S. Government) totalling $200 or more during the preceding calendar year. For a spouse, list the source and amount of any honoraria; list only the source for other spouse earned income exceeding $1,000. For further information, see Instructions, pages 12-13

	Source	Type	Amount
Examples:	Keene State	Approved Teaching Fee	$10,000
	State of Maryland	Legislative Pension	$9,000
	Civil War Roundtable (Oct. 2nd)	Spouse Speech	$1,000
	Ontario County Board of Education	Spouse Salary	NA
	General Motors Corporation	Spouse Salary	NA

For payments to charity in lieu of honoraria, use Schedule II.

SCHEDULE II -- PAYMENTS IN LIEU OF HONORARIA MADE TO CHARITY

List the source, activity (i.e., speech, appearance, or article), date, and amount of any payment made by the sponsor of an event to a charitable organization in lieu of an honorarium. A separate confidential list of charities receiving such payments must be filed directly with the Committee on Standards of Official Conduct. An envelope for transmitting the list is included in each Member's filing package. For further information, see Instructions, pages 13-14.

Source	Activity	Date	Amount
Examples Association of American Associations, Wash., D.C.	Speech	Feb. 2, 1994	$2,000
XYZ Magazine	Article	Aug. 13, 1994	$500
Hunton & Williams Environmental Law & Regulation Seminar	Speech	February 19,1997	$2,000.00
Self Insurance Institute of America	Speech	February 27, 1997	$2,000.00
American Advertising Federation	Speech	March 13, 1997	$1,000.00
Georgetown University John T. Queenan Obstetrical & Gynecological Society	Speech	April 14, 1997	$1,000.00
Computer & Communications Industry Association	Speech	June 10, 1997	$2,000.00
American Council for Capital Formation Center for Policy Research	Speech	September 24, 1997	$2,000.00

SCHEDULE III -- ASSETS AND "UNEARNED" INCOME

BLOCK A **Asset and/or Income Source** Identify (a) each asset held for investment or production of income with a fair market value exceeding $1,000 at the end of the reporting year, and (b) any other asset or source of income which generated more than $200 in "unearned" income during the year. For rental property or land, provide an address. Provide full names of any mutual funds. For an IRA or retirement plan that is *self-directed*, list the underlying assets worth more than $1,000. For an IRA or retirement plan that is *not* self-directed, name the institution holding the account. **Exclude:** Your personal residence(s) (unless there is rental income); any debt owed to you by your spouse, or by your or your spouse's child, parent, or sibling; any deposits totalling $5,000 or less in personal savings accounts; any financial interests in or income derived from U.S. Government retirement programs. If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC) or is jointly held (JT), in the optional column on the far left. For further information, see Instructions, pages 14-20			BLOCK B **Value of Asset** at close of reporting year If you use a valuation method other than fair market value, please specify the method used. If an asset was sold and is included only because it generated income, the value should be "None."	BLOCK C **Type of Income** If other than one of the listed categories, specify the type of income by writing a brief description in this block	BLOCK D **Amount of Income** For IRA's and retirement plans that are *not* self-directed, you may write in "NA" for income	BLOCK E **Transaction** Indicate if asset was purchased(P), sold(S), or exchanged(E) in reporting year
SP, DC, *Examples:* JT	SP	Mega Corp Stock 123 Main St., Dover, Del. 1st Bank of Paducah, KY accounts	$15,001 - $50,000 $250,001 - $500,000 $50,001 - $100,000	Dividends Rent Interest	$201 - $1,000 $1,001 - $2,500 $5,001 - $15,000	P
JT		Smith Barney Appreciation fund CL B	$1,001 - $15,000	Capital Gains and Dividends	$201 - $1,000	S
JT		Smith Barney Money Funds Cash Port CL A	$1,001 - $15,000	Dividends	$201 - $1,000	
		Balcor Equity Pension Investors	Indeterminate	Dividends	None	
JT		Smith Barney Appreciation Fund CL A	$15,001 - $50,000	Capital Gains and Dividends	$5,001 - $15,000	
		Allied Cap Coml Corp	$15,001 - $50,000	Dividends	$1,001 - $2,500	
		Bergstrom Cap Corp	$15,001 - $50,000	Capital Gains and Dividends	$1,001 - $2,500	
		Washington Real Est Inv Tr Sbi	$1,001 - $15,000	Dividends	$201 - $1,000	

SCHEDULE III -- ASSETS AND "UNEARNED" INCOME

	Morgan J.P. & Co Inc Zero Cpn	$15,001 - $50,000	Dividends	None	
	Vista Mutual Fund Group Growth & Income Fund	$15,001 - $50,000	Capital Gains and Dividends	$2,501 - $5,000	
JT	Vista Mutual Fund Group Cap Growth Fund	$15,001 - $50,000	Capital Gains and Dividends	$1,001 - $2,500	
JT	Nicholas Fund, Inc (IRA)	$50,001 - $100,000	Capital Gains and Dividends	$5,001 - $15,000	
	Acorn Investment Trust (previously reported as Acorn Funds)	$15,001 - $50 000	Capital Gains and Dividends	$2,501 - $5,000	
	Acorn International (previously reported as Acorn Funds)	None	Capital Gains and Dividends	$1 - $200	S
JT	Lindner Dividend Fund	None	Capital Gains and Dividends	$201 - $1,000	S
	Gabelli Asset Fund	$1,001 - $15,000	Capital Gains and Dividends	$1,001 - $2,500	
JT	First Union Bank	$100,001 - $250,000	Interest	$1,001 - $2,500	
SP	National Bank of Detroit	$1,001 - $15,000	Interest	$1,001 - $2,500	
	Municipal Bonds Oakland County, MI	$1,001 - $15,000	Interest	None	
SP	General Electric Co	$1,001 - $15,000	Dividends	$201 - $1,000	
SP	General Mills Inc	$1,001 - $15,000	Dividends	$201 - $1,000	
SP	General Motors Corp	$15,001 - $50,000	Dividends	$201 - $1,000	
SP	General Motors Corp CL H	$1 - $1,000	Dividends	$1 - $200	NA
SP	K-Mart Corp	None	Dividends	None	S
SP	Marsh & McLennan Cos Inc	$1,001 - $15,000	Dividends	$201 - $1,000	
SP	Pepsico Inc	$15,001 - $50,000	Dividends	$201 - $1,000	

SCHEDULE III -- ASSETS AND "UNEARNED" INCOME

SP	Praxair Inc	$1,001 - $15,000	Dividends	$1 - $200	
SP	Procter & Gamble Co	$1,001 - $15,000	Dividends	$1 - $200	
SP	Union Carbide Corp	None	Dividends	$1 - $200	S
SP	Unisys Corp	None	Dividends	None	S
JT	Congressional Federal Credit Union	$1,001 - $15,000	Interest	$201 - $1,000	
SP	General Motors Deferred Savings Program	$500,001 - $1,000,000	Interest	None	
SP	General Motors Pension Fund	Indeterminate	Dividends	None	
	GAM International Fund	$1,001 - $15,000	Capital Gains and Dividends	$201 - $1,000	
	Smith Barney World Funds Inc International Equity Port CL C	None	Dividends	None	S
JT	Crabbe Huson Special Funds	None	Dividends	None	S
SP	Darden Restaurants Inc	None	Dividends	$1 - $200	S
SP	UTS GMAC Def Int Deb-Princpl	$15,001 - $50,000	Dividends	None	
	Adams Express Co Maryland	$15,001 - $50,000	Capital Gains and Dividends	$1,001 - $2,500	P
	FPA Capital Fund Inc	$15,001 - $50,000	Capital Gains and Dividends	$1,001 - $2,500	
	Fannie Mae Remic	$1,001 - $15,000	Interest	$201 - $1,000	
JT	Davis New York Venture Fund	$50,001 - $100,000	Capital Gains and Dividends	$2,501 - $5,000	P
	Seligman Frontier Fd Inc	$1,001 - $15,000	Capital Gains and Dividends	$1,001 - $2,500	
	UTS Uncommon Value UT #95 A	None	Dividends	None	S
	High Income Opportunity Fd Inc	None	Dividends	$201 - $1,000	S
	Salomon Bros Fund Inc	$15,001 - $50,000	Capital Gains and Dividends	$2,501 - $5,000	

SCHEDULE III -- ASSETS AND "UNEARNED" INCOME

JT	Dodge and Cox Stock Fund	$15,001 - $50,000	Capital Gains and Dividends	$1,001 - $2,500	
	Heartland Value Fund	$15,001 - $50,000	Capital Gains and Dividends	$2,501 - $5,000	P
JT	Mutual Qualified	$100,001 - $250,000	Capital Gains and Dividends	$5,001 - $15,000	
	Mutual Shares	$1,001 - $15,000	Capital Gains and Dividends	$201 - $1,000	
SP	PBHG	$15,001 - $50,000	Dividends	None	
JT	Stein Roe Mutual Funds	None	Dividends	None	S
	UTS Equity Income Fund Dow 96-C	None	Dividends	$201 - $1,000	S
JT	Mutual Beacon	$15,001 - $50,000	Capital Gains and Dividends	$2,501 - $5,000	
JT	First Virginia Bank-Blue Ridge	$1,001 - $15,000	Interest	$1 - $200	
	Fluor Corp De	None	Dividends	None	S
	Pall Corp	None	Dividends	$1 - $200	S
	TCI Satellite Entmnt	None	Dividends	None	S
	Tambrands Inc	None	Dividends	$1 - $200	S
	Tele Commns Inc New	$1,001 - $15,000	Dividends	None	
SP	Electronic Data Sys Corp New	$1,001 - $15,000	Dividends	$1 - $200	P
	Cabin at 676 Kern Mountain Lane in New Market, VA--not income-producing property, hold note/mortgage	$100,001 - $250,000	Mortgage payment	$5,001 - $15,000	
SP	AIM Aggressive Growth Fund Class A	$1,001 - $15,000	Capital Gains and Dividends	$1 - $200	P
JT	Brandywine Fund Inc	$15,001 - $50,000	Capital Gains and Dividends	$5,001 - $15,000	P
JT	The Torray Fund	$1,001 - $15,000	Capital Gains and Dividends	$1 - $200	P

SCHEDULE III -- ASSETS AND "UNEARNED" INCOME

	UTS Equity Income Fund Dow 97-C	$15,001 - $50,000	Dividends	$1 - $200	P
	Orion Capital Corp	$1,001 - $15,000	Dividends	$1 - $200	P
	SBC Communications Inc	$1,001 - $15,000	Dividends	$201 - $1,000	P
	Transcanada Pipelines LTD	$1,001 - $15,000	Dividends	$1 - $200	P
	UTS Uncommon Values Tr #97 A	$15,001 - $50,000	Dividends	$1 - $200	P
SP	Airtouch Comms Inc	$1,001 - $15,000	Dividends	$1 - $200	P
SP	Wal-Mart Stores Inc	$1,001 - $15,000	Dividends	$1 - $200	P
SP	Apple Computer Inc	$1,001 - $15,000	Dividends	None	P
SP	Raytheon Co Class A	$1,001 - $15,000	Dividends	None	
SP	Tricon Global Restaurants (spin-off of Pepsico Inc.)	$1,001 - $15,000	Dividends	None	
SP	General Motors Corp Stock Options	Indeterminate	Dividends	None	

SCHEDULE IV -- TRANSACTIONS

Report any purchase, sale, or exchange by you, your spouse, or dependent child during the reporting year of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child, or the purchase or sale of your personal residence, unless it is rented out. For further information, see Instructions, pages 20-21.

SP,DC,JT	Asset	Type of Transaction	Date	Amount of Transaction
Example	Mega Corporation Common Stock	Purchase	10/12/94	$15,001 - $50,000
SP	AIM Aggressive Growth Fund Class A	Purchase	6/4/97	$1,001 - $15,000
JT	Crabbe Huson Special Funds	Sold	4/18/97	$1,001 - $15,000
JT	Stein Roe Mutual Funds	Sold	11/14/97	$1,001 - $15,000
JT	Mutual Qualified	Purchase	7/25/97	$15,001 - $50,000
JT	Mutual Beacon	Purchase	3/24/97	$15,001 - $50,000
	Heartland Value Fund	Purchase	2/11/97-10/31/97	$1,001 - $15,000
JT	Lindner Dividend Fund	Sold	6/23/97	$15,001 - $50,000
JT	Brandywine Fund Inc	Purchase	5/16/97	$15,001 - $50,000
	Acorn International	Sold	11/14/97	$1,001 - $15,000
JT	Davis New York Venture Fund	Purchase	2/12/97-3/20/97	$50,001 - $100,000
	Adams Express Co Maryland	Purchase	11/24/97	$1,001 - $15,000
	UTS Equity Income Fund Dow 96-C	Sold	9/22/97	$15,001 - $50,000
	UTS Equity Income Fund Dow 97-C	Purchase	9/22/97	$15,001 - $50,000
	High Income Opportunity Fd Inc	Sold	3/11/97-6/13/97	$1,001 - $15,000
	Orion Capital Corp	Purchase	6/24/97	$1,001 - $15,000
	Pall Corp	Sold	3/11/97	$1,001 - $15,000

SCHEDULE IV -- TRANSACTIONS

Report any purchase, sale, or exchange by you, your spouse, or dependent child during the reporting year of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child, or the purchase or sale of your personal residence, unless it is rented out. For further information, see Instructions, pages 20-21

SP,DC,JT	Asset	Type of Transaction	Date	Amount of Transaction
	Example: Mega Corporation Common Stock	Purchase	10/12/94	$15,001 - $50,000
	SBC Communications Inc	Purchase	3/11/97	$1,001 - $15,000
	Tambrands Inc	Sold	3/11/97	$1,001 - $15,000
	Transcanada Pipelines LTD	Purchase	6/24/97	$1,001 - $15,000
	UTS Uncommon Values #97 A	Purchase	7/1/97	$15,001 - $50,000
	Fluor Corp DE	Sold	3/11/97	$1,001 - $15,000
	Smith Barney World Funds Inc International Equity Port CL C	Sold	6/24/97	$1,001 - $15,000
	UTS Uncommon Value UT #95 A	Sold	6/13/97	$15,001 - $50,000
SP	Airtouch Comms Inc	Purchase	3/11/97	$1,001 - $15,000
SP	Darden Restaurants Inc	Sold	7/30/97	$1,001 - $15,000
SP	Electronic Data Sys Corp	Purchase	3/11/97	$1,001 - $15,000
SP	Union Carbide Corp	Sold	3/11/97	$1,001 - $15,000
SP	Wal-Mart Stores Inc	Purchase	3/11/97-3/18/97	$1,001 - $15,000
SP	Apple Computer Inc	Purchase	3/11/97	$1,001 - $15,000
SP	Motorola Inc	Purchase	7/30/97	$1,001 - $15,000
JT	The Torray Fund	Purchase	12/4/97	$1,001 - $15,000
	Final purchase of Lot 16/17 Mallard Hill Farm, Eastern Shore, Maryland (sale closed)	Purchase	2/3/97	$100,001 - $250,000

SCHEDULE VII -- TRAVEL PAYMENTS AND REIMBURSEMENTS

Identify the source and list travel itinerary, dates, and nature of expenses provided for travel and travel-related expenses totalling more than $250 received by you, your spouse, or a dependent child during the reporting period. Indicate whether a family member accompanied the traveler at the sponsor's expense, and the amount of time, if any, that was not at the sponsor's expense. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor.
Exclude: Travel-related expenses provided by federal, state and local governments, or by a foreign government required to be separately reported under the Foreign Gifts and Decorations Act (5 U S C 7342), travel paid for by a Federal political committee; travel provided to a spouse or dependent child that is totally independent of his or her relationship to you. For further information, see Instructions, pages 24-26

	Source	Date(s)	Point of Departure--Destination--Point of Return	Lodging? (Y/N)	Food? (Y/N)	Was a Family Member Included? (Y/N)	Any time not at sponsor's expense
Examples.	Chicago Chamber of Commerce	Mar 2	Wash , D C -Chicago-Wash , D C	N	N	N	N
	Mega Corporation	Aug 6-13	Wash , D C -Los Angeles-Cleveland	Y	Y	Y	4 Days
	Aspen Institute	March 7-9,1997	Washington,D.C. to Hershey, PA to Washington, D.C.	Y	Y	Y	N
	Greater Detroit Chamber of Commerce	May 28-June 1, 1997	Detroit, MI to Mackinac Island, MI to Detroit, MI	Y	Y	N	N
	Aspen Institute (Spouse was invitee; Member merely accompanied. Travel was not included)	August 9-16, 1997	Detroit, MI to Aspen, CO.	Y	Y	Y	N
	Australian Asian Pacific Economic Council & Murray Irrigation Limited	August 16-25, 1997	Aspen, CO to Canberra, Australia. Canberra to Deniliquin, Australia. Deniliquin, Australia to Washingtn, D.C.	Y	Y	N	2 and a half days
	National Mining Association	September 28-29, 1997	Detroit, MI to Lake Buena Vista, FL to Washington, D.C.	Y	Y	N	N

JOHN D. DINGELL
16TH DISTRICT, MICHIGAN

RANKING MEMBER
COMMITTEE ON COMMERCE
CO CHAIR
HOUSE GREAT LAKES TASK FORCE
MEMBER
MIGRATORY BIRD CONSERVATION COMMISSION

Congress of the United States
House of Representatives
Washington, DC 20515-2216

WASHINGTON OFFICE
ROOM 2328
RAYBURN HOUSE OFFICE BUILDING
WASHINGTON, DC 20515-2216
(202) 225-4071

DISTRICT OFFICES
5465 SCHAEFER ROAD
DEARBORN, MI 48126-3277
(313) 846-1276

23 EAST FRONT STREET
SUITE 103
MONROE, MI 48161-2228
(313) 243-1849

June 10, 1998

(12)

Ms. Robin Carle
Clerk of the House
U.S. House of Representatives
Washington, D.C. 20515

HAND DELIVERED

✓
MC

Dear Ms. Carle:

I am filing an amendment to my 1997 Financial Disclosure Statement. There were four (4) stocks (Smith Barney Appreciation Fund CL B, K-Mart, Unisys, TCI Satellite Entmnt) listed in Schedule III as having been sold. This was an error to indicate a sale of these stocks because the transactions actually fall beneath the $1,000 disclosure limit.

Another amendment concerns that of Raytheon Co Class A stock. The stock is disclosed this year for the first time because it it a spin-off of the General Motors stock and will be listed in subsequent years.

The last amendment concerns the Motorola stock. The stock was initially listed on Schedule IV, Transactions, but not on Schedule III, Assets and Unearned Income. The amended Financial Disclosure statement now includes Motorola on Schedule III.

I thank you for you cooperation in this matter.

With every good wish,

Sincerely yours,

John D. Dingell
Member of Congress

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UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1997

Form A
For use by Members, officers, and employees

RECEIVED
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HAND DELIVER

(Office Use Only)

John D Dingell
(Full Name)

2328 Rayburn H O B
(Mailing Address)

Washington DC 20515

Daytime Telephone: 202-225-4071

Filer Status: [X] Member of the U S House of Representatives — State: MI, District: 16 — [ ] Officer or Employee — Employing Office

Report Type: [ ] Annual (May 15) [X] Amendment [ ] Termination — Termination Date

A $200 penalty shall be assessed against anyone who files more than 30 days late.

PRELIMINARY INFORMATION -- ANSWER EACH OF THESE QUESTIONS

I Did you or your spouse have "earned" income (e g , salaries or fees) of $200 or more from any source in the reporting period? **If yes, complete and attach Schedule I.**	Yes [X]	No [ ]	VI Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i e , aggregating more than $250 and not otherwise exempt)? **If yes, complete and attach Schedule VI.**	Yes [ ]	No [X]
II Did any individual or organization make a donation to charity in lieu of paying you for a speech, apppearance, or article in the reporting period? **If yes, complete and attach Schedule II.**	Yes [X]	No [ ]	VII Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $250 from one source)? **If yes, complete and attach Schedule VII.**	Yes [X]	No [ ]
III Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? **If yes, complete and attach Schedule III.**	Yes [X]	No [ ]	VIII Did you hold any reportable positions on or before the date of filing in the current calendar year? **If yes, complete and attach Schedule VIII.**	Yes [ ]	No [X]
IV Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset worth more than $1,000 in the reporting period? **If yes, complete and attach Schedule IV.**	Yes [X]	No [ ]	IX Did you have any reportable agreement or arrangement with an outside entity? **If yes, complete and attach Schedule IX.**	Yes [ ]	No [X]
V Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? **If yes, complete and attach Schedule V.**	Yes [ ]	No [X]	**Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.**		

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION -- ANSWER EACH OF THESE QUESTIONS

TRUSTS--Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child? (See Instructions, pages 10-11)	Yes [ ]	No [X]
EXEMPTION Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption? (See Instructions, page 11)	Yes [X]	No [ ]

CERTIFICATION -- THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct or its designee Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil penalties and criminal sanctions (See 5 U S C app 4, 104 and 18 U S C 1001).

SIGNATURE OF REPORTING INDIVIDUAL

DATE (Month/Day/Year) 6-10-98

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Name John D Dingell	Page ___ of __

SCHEDULE I -- EARNED INCOME

List the source, type, and amount of earned income from any source (other than the filer's current employment by the U.S. Government) totalling $200 or more during the preceding calendar year. For a spouse, list the source and amount of any honoraria, list only the source for other spouse earned income exceeding $1,000. For further information, see Instructions, pages 12-13

	Source	Type	Amount
Examples	Keene State	Approved Teaching Fee	$10,000
	State of Maryland	Legislative Pension	$9,000
	Civil War Roundtable (Oct. 2nd)	Spouse Speech	$1,000
	Ontario County Board of Education	Spouse Salary	NA
	General Motors Corporation	Spouse Salary	NA

For payments to charity in lieu of honoraria, use Schedule II.

SCHEDULE II -- PAYMENTS IN LIEU OF HONORARIA MADE TO CHARITY

List the source, activity (i.e., speech, appearance, or article), date, and amount of any payment made by the sponsor of an event to a charitable organization in lieu of an honorarium. A separate confidential list of charities receiving such payments must be filed directly with the Committe on Standards of Official Conduct. An envelope for transmitting the list is included in each Member's filing package. For further information, see Instructions, pages 13-14.

Source	Activity	Date	Amount
Examples Association of American Associations, Wash., D.C.	Speech	Feb. 2, 1994	$2,000
XYZ Magazine	Article	Aug. 13, 1994	$500
Hunton & Williams Environmental Law & Regulation Seminar	Speech	February 19,1997	$2,000.00
Self Insurance Institute of America	Speech	February 27, 1997	$2,000.00
American Advertising Federation	Speech	March 13, 1997	$1,000.00
Georgetown University John T. Queenan Obstetrical & Gynecological Society	Speech	April 14, 1997	$1,000.00
Computer & Communications Industry Association	Speech	June 10, 1997	$2,000.00
Americam Council for Capital Formation Center for Policy Research	Speech	September 24, 1997	$2,000.00

Name John D Dingell	Page ____ of __

SCHEDULE III -- ASSETS AND "UNEARNED" INCOME

	BLOCK A **Asset and/or Income Source** Identify (a) each asset held for investment or production of income with a fair market value exceeding $1,000 at the end of the reporting year, and (b) any other asset or source of income which generated more than $200 in "unearned" income during the year. For rental property or land, provide an address. Provide full names of any mutual funds. For an IRA or retirement plan that is *self-directed*, list the underlying assets worth more than $1,000. For an IRA or retirement plan that is *not* self-directed, name the institution holding the account. **Exclude:** Your personal residence(s) (unless there is rental income), any debt owed to you by your spouse, or by your or your spouse's child, parent, or sibling, any deposits totalling $5,000 or less in personal savings accounts, any financial interests in or income derived from U S Government retirement programs If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC) or is jointly held (JT), in the optional column on the far left For further information, see Instructions, pages 14-20	BLOCK B **Value of Asset** at close of reporting year If you use a valuation method other than fair market value, please specify the method used If an asset was sold and is included only because it generated income, the value should be "None "	BLOCK C **Type of Income** If other than one of the listed categories, specify the type of income by writing a brief description in this block	BLOCK D **Amount of Income** For IRA's and retirement plans that are *not* self-directed, you may write in "NA" for income.	BLOCK E **Transaction** Indicate if asset was purchased(P), sold(S), or exchanged(E) in reporting year
SP, DC, *Examples* SP JT	Mega Corp Stock 123 Main St , Dover, Del 1st Bank of Paducah, KY accounts	$15,001 - $50,000 $250,001 - $500,000 $50,001 - $100,000	Dividends Rent Interest	$201 - $1,000 $1,001 - $2,500 $5,001 - $15,000	P
JT	Smith Barney Appreciation fund CL B	$1,001 - $15,000	Capital Gains and Dividends	$201 - $1,000	S
JT	Smith Barney Money Funds Cash Port CL B	$1,001 - $15,000	Dividends	$201 - $1,000	
	Balcor Equity Pension Investors	None	Dividends	None	
JT	Smith Barney Appreciation Fund CL A	$15,001 - $50,000	Capital Gains and Dividends	$5,001 - $15,000	
	Allied Cap Coml Corp	$15,001 - $50,000	Dividends	$1,001 - $2,500	
	Bergstrom Cap Corp	$15,001 - $50,000	Capital Gains and Dividends	$1,001 - $2,500	
	Washington Real Est Inv Tr Sbi	$1,001 - $15,000	Dividends	$201 - $1,000	

SCHEDULE III -- ASSETS AND "UNEARNED" INCOME

	Morgan J P. & Co Inc Zero Cpn	$15,001 - $50,000	Dividends	None	
	Vista Mutual Fund Group Growth & Income Fund	$15,001 - $50,000	Capital Gains and Dividends	$2,501 - $5,000	
JT	Vista Mutual Fund Group Cap Growth Fund	$15,001 - $50,000	Capital Gains and Dividends	$1,001 - $2,500	
JT	Nicholas Fund, Inc (IRA)	$50,001 - $100,000	Capital Gains and Dividends	$5,001 - $15,000	
	Acorn Investment Trust (previously reported as Acorn Funds)	$15,001 - $50,000	Capital Gains and Dividends	$2,501 - $5,000	
	Acorn International (previously reported as Acorn Funds)	None	Capital Gains and Dividends	$1 - $200	S
JT	Lindner Dividend Fund	None	Capital Gains and Dividends	$201 - $1,000	S
	Gabelli Asset Fund	$1,001 - $15,000	Capital Gains and Dividends	$1,001 - $2,500	
JT	First Union Bank	$100,001 - $250,000	Interest	$1,001 - $2,500	
SP	National Bank of Detroit	$1,001 - $15,000	Interest	$1,001 - $2,500	
	Municipal Bonds Oakland County, MI	$1,001 - $15,000	Interest	None	
SP	General Electric Co	$1,001 - $15,000	Dividends	$201 - $1,000	
SP	General Mills Inc	$1,001 - $15,000	Dividends	$201 - $1,000	
SP	General Motors Corp	$15,001 - $50,000	Dividends	$201 - $1,000	
SP	General Motors Corp CL H	$1 - $1,000	Dividends	$1 - $200	NA
SP	K-Mart Corp	None	Dividends	None	
SP	Marsh & McLennan Cos Inc	$1,001 - $15,000	Dividends	$201 - $1,000	
SP	Pepsico Inc	$15,001 - $50,000	Dividends	$201 - $1,000	

SCHEDULE III -- ASSETS AND "UNEARNED" INCOME

SP	Praxair Inc	$1,001 - $15,000	Dividends	$1 - $200	
SP	Procter & Gamble Co	$1,001 - $15,000	Dividends	$1 - $200	
SP	Union Carbide Corp	None	Dividends	$1 - $200	S
SP	Unisys Corp	None	Dividends	None	
JT	Congressional Federal Credit Union	$1,001 - $15,000	Interest	$201 - $1,000	
SP	General Motors Deferred Savings Program	$500,001 - $1,000,000	Interest	None	
SP	General Motors Pension Fund	None	Dividends	None	
	GAM International Fund	$1,001 - $15,000	Capital Gains and Dividends	$201 - $1,000	
	Smith Barney World Funds Inc International Equity Port CL C	None	Dividends	None	S
JT	Crabbe Huson Special Funds	None	Dividends	None	S
SP	Darden Restaurants Inc	None	Dividends	$1 - $200	S
SP	UTS GMAC Def Int Deb-Princpl	$15,001 - $50,000	Dividends	None	
	Adams Express Co Maryland	$15,001 - $50,000	Capital Gains and Dividends	$1,001 - $2,500	P
	FPA Capital Fund Inc	$15,001 - $50,000	Capital Gains and Dividends	$1,001 - $2,500	
	Fannie Mae Remic	$1,001 - $15,000	Interest	$201 - $1,000	
JT	Davis New York Venture Fund	$50,001 - $100,000	Capital Gains and Dividends	$2,501 - $5,000	P
	Seligman Frontier Fd Inc	$1,001 - $15,000	Capital Gains and Dividends	$1,001 - $2,500	
	UTS Uncommon Value UT #95 A	None	Dividends	None	S
	High Income Opportunity Fd Inc	None	Dividends	$201 - $1,000	S
	Salomon Bros Fund Inc	$15,001 - $50,000	Capital Gains and Dividends	$2,501 - $5,000	

SCHEDULE III -- ASSETS AND "UNEARNED" INCOME

JT	Dodge and Cox Stock Fund	$15,001 - $50,000	Capital Gains and Dividends	$1,001 - $2,500	
	Heartland Value Fund	$15,001 - $50,000	Capital Gains and Dividends	$2,501 - $5,000	P
JT	Mutual Qualified	$100,001 - $250,000	Capital Gains and Dividends	$5,001 - $15,000	
	Mutual Shares	$1,001 - $15,000	Capital Gains and Dividends	$201 - $1,000	
SP	PBHG	$15,001 - $50,000	Dividends	None	
JT	Stein Roe Mutual Funds	None	Dividends	None	S
	UTS Equity Income Fund Dow 96-C	None	Dividends	$201 - $1,000	S
JT	Mutual Beacon	$15,001 - $50,000	Capital Gains and Dividends	$2,501 - $5,000	
JT	First Virginia Bank-Blue Ridge	$1,001 - $15,000	Interest	$1 - $200	
	Fluor Corp De	None	Dividends	None	S
	Pall Corp	None	Dividends	$1 - $200	S
	TCI Satellite Entmnt	None	Dividends	None	
	Tambrands Inc	None	Dividends	$1 - $200	S
	Tele Commns Inc New	$1,001 - $15,000	Dividends	None	
SP	Electronic Data Sys Corp New	$1,001 - $15,000	Dividends	$1 - $200	P
	Cabin at 676 Kern Mountain Lane in New Market, VA--not income-producing property, hold note/mortgage	$100,001 - $250,000	Mortgage payment	$5,001 - $15,000	
SP	AIM Aggressive Growth Fund Class A	$1,001 - $15,000	Capital Gains and Dividends	$1 - $200	P
JT	Brandywine Fund Inc	$15,001 - $50,000	Capital Gains and Dividends	$5,001 - $15,000	P
JT	The Torray Fund	$1,001 - $15,000	Capital Gains and Dividends	$1 - $200	P

Name John D. Dingell	Page ____ of ____

SCHEDULE III -- ASSETS AND "UNEARNED" INCOME

	UTS Equity Income Fund Dow 97-C	$15,001 - $50,000	Dividends	$1 - $200	P
	Orion Capital Corp	$1,001 - $15,000	Dividends	$1 - $200	P
	SBC Communications Inc	$1,001 - $15,000	Dividends	$201 - $1,000	P
	Transcanada Pipelines LTD	$1,001 - $15,000	Dividends	$1 - $200	P
	UTS Uncommon Values Tr #97 A	$15,001 - $50,000	Dividends	$1 - $200	P
SP	Airtouch Comms Inc	$1,001 - $15,000	Dividends	$1 - $200	P
SP	Wal-Mart Stores Inc	$1,001 - $15,000	Dividends	$1 - $200	P
SP	Apple Computer Inc	$1,001 - $15,000	Dividends	None	P
SP	Raytheon Co Class A (spin-off of General Motors)	$1,001 - $15,000	Dividends	None	
SP	Tricon Global Restaurants (spin-off of Pepsico Inc.)	$1,001 - $15,000	Dividends	None	
SP	General Motors Corp Stock Options	None	Dividends	None	
SP	Motorola	$1,001 - $15,000	Dividends	$1 - $200	P

Name John D. Dingell	Page ____ of ____

SCHEDULE IV -- TRANSACTIONS

Report any purchase, sale, or exchange by you, your spouse, or dependent child during the reporting year of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child, or the purchase or sale of your personal residence, unless it is rented out. For further information, see instructions, pages 20-21.

SP,DC,JT	Asset	Type of Transaction	Date	Amount of Transaction
	Example Mega Corporation Common Stock	Purchase	10/12/94	$15,001 - $50,000
SP	AIM Aggressive Growth Fund Class A	Purchase	6/4/97	$1,001 - $15,000
JT	Crabbe Huson Special Funds	Sold	4/18/97	$1,001 - $15,000
JT	Stein Roe Mutual Funds	Sold	11/14/97	$1,001 - $15,000
JT	Mutual Qualified	Purchase	7/25/97	$15,001 - $50,000
JT	Mutual Beacon	Purchase	3/24/97	$15,001 - $50,000
	Heartland Value Fund	Purchase	2/11/97-10/31/97	$1,001 - $15,000
JT	Lindner Dividend Fund	Sold	6/23/97	$15,001 - $50,000
JT	Brandywine Fund Inc	Purchase	5/16/97	$15,001 - $50,000
	Acorn International	Sold	11/14/97	$1,001 - $15,000
JT	Davis New York Venture Fund	Purchase	2/12/97-3/20/97	$50,001 - $100,000
	Adams Express Co Maryland	Purchase	11/24/97	$1,001 - $15,000
	UTS Equity Income Fund Dow 96-C	Sold	9/22/97	$15,001 - $50,000
	UTS Equity Income Fund Dow 97-C	Purchase	9/22/97	$15,001 - $50,000
	High Income Opportunity Fd Inc	Sold	3/11/97-6/13/97	$1,001 - $15,000
	Orion Capital Corp	Purchase	6/24/97	$1,001 - $15,000
	Pall Corp	Sold	3/11/97	$1,001 - $15,000

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	Transcanada Pipelines LTD	Purchase	6/24/97	$1,001 - $15,000
	UTS Uncommon Values #97 A	Purchase	7/1/97	$15,001 - $50,000
	Fluor Corp DE	Sold	3/11/97	$1,001 - $15,000
	Smith Barney World Funds Inc International Equity Port CL C	Sold	6/24/97	$1,001 - $15,000
	UTS Uncommon Value UT #95 A	Sold	6/13/97	$15,001 - $50,000
SP	Airtouch Comms Inc	Purchase	3/11/97	$1,001 - $15,000
SP	Darden Restaurants Inc	Sold	7/30/97	$1,001 - $15,000
SP	Electronic Data Sys Corp	Purchase	3/11/97	$1,001 - $15,000
SP	Union Carbide Corp	Sold	3/11/97	$1,001 - $15,000
SP	Wal-Mart Stores Inc	Purchase	3/11/97-3/18/97	$1,001 - $15,000
SP	Apple Computer Inc	Purchase	3/11/97	$1,001 - $15,000
SP	Motorola Inc	Purchase	7/30/97	$1,001 - $15,000
JT	The Torray Fund	Purchase	12/4/97	$1,001 - $15,000
	Final purchase of Lot 16/17 Mallard Hill Farm, Eastern Shore, Maryland (sale closed)	Purchase	2/3/97	$100,001 - $250,000

SCHEDULE VII -- TRAVEL PAYMENTS AND REIMBURSEMENTS

Identify the source and list travel itinerary, dates, and nature of expenses provided for travel and travel-related expenses totalling more than $250 received by you, your spouse, or a dependent child during the reporting period. Indicate whether a family member accompanied the traveler at the sponsor's expense, and the amount of time, if any, that was not at the sponsor's expense. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor.
Exclude: Travel-related expenses provided by federal, state and local governments, or by a foreign government required to be separately reported under the Foreign Gifts and Decorations Act (5 U.S.C. 7342); travel paid for by a Federal political committee; travel provided to a spouse or dependent child that is totally independent of his or her relationship to you. For further information, see instructions, pages 24-26.

Source	Date(s)	Point of Departure–Destination–Point of Return	Lodging? (Y/N)	Food? (Y/N)	Was a Family Member Included? (Y/N)	Any time not at sponsor's expense
Examples Chicago Chamber of Commerce	Mar 2	Wash., D.C.-Chicago-Wash., D.C.	N	N	N	N
Mega Corporation	Aug 6-13	Wash., D.C.-Los Angeles-Cleveland	Y	Y	Y	4 Days
Aspen Institute	March 7-9,1997	Washington,D.C. to Hershey, PA to Washington, D.C.	Y	Y	Y	N
Greater Detroit Chamber of Commerce	May 28-June 1, 1997	Detroit, MI to Mackinac Island, MI to Detroit, MI	Y	Y	N	N
Aspen Institute (Spouse was invitee; Member merely accompanied. Travel was not included)	August 9-16, 1997	Detroit, MI to Aspen, CO.	Y	Y	Y	N
Australian Asian Pacific Economic Council & Murray Irrigation Limited	August 16-25, 1997	Aspen, CO to Canberra, Australia. Canberra to Deniliquin, Australia. Deniliquin, Australia to Washingtn, D.C.	Y	Y	N	2 and a half days
National Mining Association	September 28-29, 1997	Detroit, MI to Lake Buena Vista, FL to Washington, D.C.	Y	Y	N	N

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UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1997

Form A
For use by Members, officers, and employees

JULIAN C. DIXON
(Full Name)

2252 Rayburn House Office Building
(Mailing Address)

Washington DC 20515

Daytime Telephone: (202) 225-7084

MC (Office Use Only)

8

Filer Status	[X] Member of the U.S. House of Representatives	State: CA District: 32	[ ] Officer or Employee	Employing Office:	
Report Type	[X] Annual (May 15)	[ ] Amendment		[ ] Termination	Termination Date:

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II. Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? If yes, complete and attach Schedule II.	Yes [ ]	No [X]	VII. Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $250 from one source)? If yes, complete and attach Schedule VII.	Yes [X]	No [ ]
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SIGNATURE OF REPORTING INDIVIDUAL

DATE (Month/Day/Year) 5/15/98

970

SCHEDULE I -- EARNED INCOME

List the source, type, and amount of earned income from any source (other than the filer's current employment by the U.S. Government) totaling $200 or more during the preceding calendar year. For a spouse, list the source and amount of any honoraria; list only the source for other spouse earned income exceeding $1,000. For further information, see instructions, pages 12-13.

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	Civil War Roundtable (Oct. 2nd)	Spouse Speech	$1,000
	Ontario County Board of Education	Spouse Salary	NA
	Mir Kanon/Peideau, Inc., Los Angeles, CA	Spouse Salary/Director Fees	NA
	Lanta Concessions	Spouse Salary/Director Fees	NA

For payments to charity in lieu of honoraria, use Schedule II.

SCHEDULE III -- ASSETS AND "UNEARNED" INCOME

BLOCK A **Asset and/or Income Source** Identify (a) each asset held for investment or production of income with a fair market value exceeding $1,000 at the end of the reporting year, and (b) any other asset or source of income which generated more than $200 in "unearned" income during the year. For rental property or land, provide an address. Provide full names of any mutual funds. For an IRA or retirement plan that is *self-directed*, list the underlying assets worth more than $1,000. For an IRA or retirement plan that is *not* self-directed, name the institution holding the account. Exclude: Your personal residence(s) (unless there is rental income); any debt owed to you by your spouse, or by your or your spouse's child, parent, or sibling; any deposits totalling $5,000 or less in personal savings accounts; any financial interests in or income derived from U.S. Government retirement programs. If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC) or is jointly held (JT), in the optional column on the far left. For further information, see instructions, pages 14-20	BLOCK B **Value of Asset** at close of reporting year. If you use a valuation method other than fair market value, please specify the method used. If an asset was sold and is included only because it generated income, the value should be "None."	BLOCK C **Type of Income** If other than one of the listed categories, specify the type of income by writing a brief description in this block.	BLOCK D **Amount of Income** For IRA's and retirement plans that are *not* self-directed, you may write in "NA" for income.	BLOCK E **Transaction** Indicate if asset was purchased(P), sold(S), or exchanged(E) in reporting year.
SP, DC, Examples: JT	Mega Corp. Stock SP 123 Main St., Dover, Del. 1st Bank of Peducah, KY accounts	$15,001 - $50,000 $250,001 - $500,000 $50,001 - $100,000	Dividends Rent Interest	$201 - $1,000 $1,001 - $2,500 $5,001 - $15,000	P
	Industrial Bank of Washington, D.C.	$1,001 - $15,000	Dividends	$201 - $1,000	
SP	Mr Kenon/Paldeau, Inc. (11.104% - acquired 37 additional shares at $1.00 par)	$250,001 - $500,000	Dividends	$100,001 - $1,000,000	P
	Merrill Lynch Investment Acct (previously MM Cash Acct)	$250,001 - $500,000	Interest	$15,001 - $50,000	P
	IRA - Merrill Lynch, Pierce, Fenner & Smith - Self (Not self directed)	$15,001 - $50,000	Dividends	$5,001 - $15,000	
SP	IRA - Merrill Lynch, Pierce, Fenner & Smith - Spouse (Not self directed)	$15,001 - $50,000	Dividends	$5,001 - $15,000	
	1299 Delaware Ave, SW, Washington, DC	$100,001 - $250,000	Rent	$5,001 - $15,000	
	Fidelity Fed. Bank, Culver City, CA - CDs & checking	$15,001 - $50,000	Interest	$2,501 - $5,000	

SCHEDULE III -- ASSETS AND "UNEARNED" INCOME

	5 Rare Coins	$1,001 - $15,000		None - $200	
SP	Concourse Gift & News, Inc.	$15,001 - $50,000		None - $200	
	Note on 5709 Canterbury Dr., Culver City, CA (former personal residence) - NOTE PAID OFF	None - $1,000	Interest	$1,001 - $2,500	
SP	Lanta Concessions, Inc.	$250,001 - $500,000	Dividends	$15,001 - $50,000	
SP	8701 Chessington Dr., Inglewood, CA	$100,001 - $250,000		None - $200	
SP	Lanta Concessions - Note Receivable	$15,001 - $50,000	Interest	None - $200	

SCHEDULE IV – TRANSACTIONS

Report any purchase, sale, or exchange by you, your spouse, or dependent child during the reporting year of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child, or the purchase or sale of your personal residence, unless it is rented out. For further information, see instructions, pages 20-21.

SP,DC,JT	Asset	Type of Transaction	Date	Amount of Transaction
	Example: Mega Corporation Common Stock	*Purchase*	10/12/94	$15,001 - $50,000
	Merrill Lynch Invest. Acct.		Multiple throughout year	$50,001 - $100,000

SCHEDULE V – LIABILITIES

Report liabilities of over $10,000 owed to any one creditor *at any time* during the reporting period by you, your spouse, or dependent child. Mark the highest amount owed during the year.
Excludes: Any mortgage on your personal residence (unless it is rented out); loans secured by automobiles, household furniture, or appliances, and liabilities owed to a spouse, or the child, parent, or sibling of you or your spouse. Report *revolving charge accounts* only if the balance at the end of the reporting period exceeded $10,000. For further information, see instructions, pages 21-22.

SP,DC,J	Creditor	Type of Liability	Amount of Liability
	Example: First Bank of Wilmington, Delaware	Mortgage on 123 Main St., Dover, Del.	$100,001 - $250,000
	First Nationwide	Mortgage on 1299 Delaware Ave, SW, Wash. DC	$100,001 - $250,000
SP	South Trust Bank of GA	Business Investment	$100,001 - $250,000
SP	Glendale Federal, Glendale, CA	Mortgage on 8701 Chessington Dr., Inglewood, CA	$100,001 - $250,000
	Loan against ML Money Market Cash Account Assets	Home Improvement	$50,001 - $100,000
SP	1st Union Bank of GA.	Business Investment	$100,001 - $250,000

SCHEDULE VII -- TRAVEL PAYMENTS AND REIMBURSEMENTS

Identify the source and list travel itinerary, dates, and nature of expenses provided for travel and travel-related expenses totaling more than $250 received by you, your spouse, or a dependent child during the reporting period. Indicate whether a family member accompanied the traveler at the sponsor's expense, and the amount of time, if any, that was not at the sponsor's expense. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor.
Excludes: Travel-related expenses provided by federal, state and local governments, or by a foreign government required to be separately reported under the Foreign Gifts and Decorations Act (5 U.S.C. 7342); travel paid for by a Federal political committee; travel provided to a spouse or dependent child that is totally independent of his or her relationship to you. For further information, see Instructions, pages 24-26

Source	Date(s)	Point of Departure--Destination--Point of Return	Lodging? (Y/N)	Food? (Y/N)	Was a Family Member Included? (Y/N)	Any time not at sponsor's expense
Examples: Chicago Chamber of Commerce	Mar 2	Wash., D.C.-Chicago-Wash., D.C.	N	N	N	N
Mega Corporation	Aug 6-13	Wash., D.C.-Los Angeles-Cleveland	Y	Y	Y	4 Days
The Aspen Institute	March 7-9	DC-Hershey, PA-DC	Y	Y	N	No

SCHEDULE VIII – POSITIONS

Report all positions, compensated or uncompensated, held during the current calendar year as an officer, director, trustee of an organization, partner, proprietor, representative, employee, or consultant of any corporation, firm, partnership, or other business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States. For further information, see instructions, page 28.
Exclude: Positions held in any religious, social, fraternal, or political entities; positions solely of an honorary nature; and positions listed on Schedule I.

Position	Organization
Board Member	CBC Foundation
President (spouse)	Peideau, Inc.
President (spouse)	Concourse Gift & News Inc.
VP/Secretary/COO (spouse)	Lanta Concessions, Inc.
Trustee (spouse)	Otis Institute of Art & Design
Trustee (spouse)	Hugh O'Brien Youth Foundation (HOBY)
Director (spouse)	Mir Kamon

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OFFICE OF THE CLERK
U.S. HOUSE OF REPRESENTATIVES

UNITED STATES HOUSE OF REPRESENTATIVES
FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1997

Form A
For use by Members, officers, and employees

Lloyd Doggett
(Full Name)

1200 Baylor, #401
(Mailing Address)

Austin TX 78703

Daytime Telephone: 202-225-4865

HAND DELIVERED (21)
(Office Use Only)

Filer Status	[X]	Member of the U S House of Representatives	State TX District 10	[ ]	Officer or Employee	Employing Office
Report Type	[X]	Annual (May 15)	[ ] Amendment		[ ] Termination	Termination Date

A $200 penalty shall be assessed against anyone who files more than 30 days late.

PRELIMINARY INFORMATION -- ANSWER EACH OF THESE QUESTIONS

I Did you or your spouse have "earned" income (e g , salaries or fees) of $200 or more from any source in the reporting period?
If yes, complete and attach Schedule I. Yes [X] No [ ]

II Did any individual or organization make a donation to charity in lieu of paying you for a speech, apppearance, or article in the reporting period?
If yes, complete and attach Schedule II. Yes [ ] No [X]

III Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period?
If yes, complete and attach Schedule III. Yes [X] No [ ]

IV Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset worth more than $1,000 in the reporting period?
If yes, complete and attach Schedule IV. Yes [X] No [ ]

V Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period?
If yes, complete and attach Schedule V. Yes [X] No [ ]

VI Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i e , aggregating more than $250 and not otherwise exempt)?
If yes, complete and attach Schedule VI. Yes [ ] No [X]

VII Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $250 from one source)?
If yes, complete and attach Schedule VII. Yes [X] No [ ]

VIII Did you hold any reportable positions on or before the date of filing in the current calendar year?
If yes, complete and attach Schedule VIII. Yes [X] No [ ]

IX Did you have any reportable agreement or arrangement with an outside entity?
If yes, complete and attach Schedule IX. Yes [ ] No [X]

Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION -- ANSWER EACH OF THESE QUESTIONS

TRUSTS- Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child? (See Instructions, pages 10-11) Yes [ ] No [X]

EXEMPTION Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption? (See Instructions, page 11) Yes [ ] No [X]

CERTIFICATION -- THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended. The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct or its designee. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil penalties and criminal sanctions (See 5 U.S.C. app. 4, 104 and 18 U.S.C 1001)

SIGNATURE OF REPORTING INDIVIDUAL: Lloyd Doggett

DATE (Month/Day/Year): 5/15/98

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SCHEDULE I -- EARNED INCOME

List the source, type, and amount of earned income from any source (other than the filer's current employment by the U.S. Government) totalling $200 or more during the preceding calendar year. For a spouse, list the source and amount of any honoraria; list only the source for other spouse earned income exceeding $1,000. For further information, see instructions, pages 12-13

	Source	Type	Amount
Examples	Keene State	Approved Teaching Fee	$10,000
	State of Maryland	Legislative Pension	$9,000
	Civil War Roundtable (Oct 2nd)	Spouse Speech	$1,000
	Ontario County Board of Education	Spouse Salary	NA
	U.S. Department of Education	Spouse Salary	NA
	Texas ERS	Annuity	$27,612.00

For payments to charity in lieu of honoraria, use Schedule II.

SCHEDULE III -- ASSETS AND "UNEARNED" INCOME

BLOCK A **Asset and/or Income Source** Identify (a) each asset held for investment or production of income with a fair market value exceeding $1,000 at the end of the reporting year, and (b) any other asset or source of income which generated more than $200 in "unearned" income during the year. For rental property or land, provide an address. Provide full names of any mutual funds. For an IRA or retirement plan that is *self-directed*, list the underlying assets worth more than $1,000. For an IRA or retirement plan that is *not* self-directed, name the institution holding the account. **Exclude:** Your personal residence(s) (unless there is rental income), any debt owed to you by your spouse, or by your or your spouse's child, parent, or sibling, any deposits totalling $5,000 or less in personal savings accounts, any financial interests in or income derived from U.S. Government retirement programs. If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC) or is jointly held (JT), in the optional column on the far left. For further information, see Instructions, pages 14-20	BLOCK B **Value of Asset** at close of reporting year If you use a valuation method other than fair market value, please specify the method used If an asset was sold and is included only because it generated income, the value should be "None."	BLOCK C **Type of Income** If other than one of the listed categories, specify the type of income by writing a brief description in this block	BLOCK D **Amount of Income** For IRA's and retirement plans that are *not* self-directed, you may write in "NA" for income	BLOCK E **Transaction** Indicate if asset was purchased(P), sold(S), or exchanged(E) in reporting year
SP, DC, JT *Examples* SP	Mega Corp. Stock 123 Main St., Dover, Del 1st Bank of Paducah, KY accounts	$15,001 - $50,000 $250,001 - $500,000 $50,001 - $100,000	Dividends Rent Interest	$201 - $1,000 $1,001 - $2,500 $5,001 - $15,000	P
	6734 Spicewood Springs, Austin, TX	$250,001 - $500,000	Rent	$5,001 - $15,000	
	Lohman's Ford Crossing Rd., Travis County, TX	$15,001 - $50,000		None	
	1510 Ullrich, Austin, TX (1/4)	$15,001 - $50,000	Rent	$201 - $1,000	
	508 Gatetree, Austin, TX (1/4)	$15,001 - $50,000	Rent	$201 - $1,000	
	Mineral Interest, McFarland Tract, Ward Co., TX	$1,001 - $15,000	Royalty	$1 - $200	
	Great Hall Money Market Shares	$100,001 - $250,000	Dividends	$5,001 - $15,000	

SCHEDULE III -- ASSETS AND "UNEARNED" INCOME

	Maytag Corp Note Due 7/15/99	$100,001 - $250,000	Interest	$5,001 - $15,000	
	Guaranty Federal, Austin-Savings	$15,001 - $50,000	Interest	$201 - $1,000	
	Boeing Co Stock	$15,001 - $50,000	Dividends	$1 - $200	P
	Cross Timbers Oil Stock	$1,001 - $15,000	Dividends	$1 - $200	S
	Texas Utilities (merger with Enserch Corp)	$1,001 - $15,000	Dividends	$1 - $200	
	Farah	$15,001 - $50,000		None	
	Fed Natl Mtg Assn	$15,001 - $50,000	Dividends	$201 - $1,000	S
	IBM Stock	$250,001 - $500,000	Dividends	$2,501 - $5,000	P
	Kirby Corp Stock	None		None	S
	Nuveen Bond Fund Shares	$1,001 - $15,000	Dividends	$201 - $1,000	
	Oppenheimer Multi Sector Shares	$1,001 - $15,000	Dividends	$201 - $1,000	P
	Whole Foods Stock	$250,001 - $500,000		None	
	TIAA-CREF Retirement	$1,001 - $15,000	Interest	$1 - $200	
	Founders Growth Shares	None		None	S
	Invesco Small Co Growth, (was Emerging Growth Shares	$100,001 - $250,000	Dividends	$15,001 - $50,000	P
	Janus Twenty Fund Shares	$15,001 - $50,000	Dividends	$1,001 - $2,500	P
	Price Science and Tech Shares	$100,001 - $250,000	Dividends	$15,001 - $50,000	P
	Oakmark, Int Shares	$250,001 - $500,000	Dividends	$5,001 - $15,000	P
	Vanguard International Value, (was Trustees Int Shares)	$100,001 - $250,000	Dividends	$15,001 - $50,000	P
	Charles Schwab Money Mkt Shares	$100,001 - $250,000	Dividends	$2,501 - $5,000	P

SCHEDULE III -- ASSETS AND "UNEARNED" INCOME

	Vanguard Municipal Bond Fund (Money Mkt)	$50,001 - $100,000	Dividends	$1,001 - $2,500	P
	Charles Schwab Tax Exempt MM	$500,001 - $1,000,000	Dividends	$15,001 - $50,000	P
	Chevron Corp Stock	$15,001 - $50,000	Dividends	$201 - $1,000	
	Coca Cola Co Stock	$50,001 - $100,000	Dividends	$201 - $1,000	
	Driefontein Con Adr Stock	$1 - $1,000	Dividends	None	
	Exxon Corp Stock	$50,001 - $100,000	Dividends	$1,001 - $2,500	
	General Motors Corp Stock	$1,001 - $15,000	Dividends	$201 - $1,000	S
	First State Bank	$15,001 - $50,000	Interest	$201 - $1,000	
	Compass Bank, (was Horizon Bank)	$15,001 - $50,000	Interest	$201 - $1,000	
	Thornburg Mtg Asset Corp	None		None	S
	Heartland Value Plus Shares	$250,001 - $500,000	Dividends	$15,001 - $50,000	P
	Selected American Shares	$250,001 - $500,000	Dividends	$15,001 - $50,000	P
	Vanguard Primecap Shares	$100,001 - $250,000	Dividends	$5,001 - $15,000	P
	3800 Kennelwood, Austin, TX	$100,001 - $250,000		None	
	Mutual of America 403B	$50,001 - $100,000	Dividends	$5,001 - $15,000	P
	Merchantile Bancorp Inc	None	Dividends	$201 - $1,000	S
	Microsoft Corp	None		None	S
	Motorola Inc	None		$1 - $200	S
	Oracle Corp	$1,001 - $15,000		None	S, P
	Schlotzskys Inc	$1,001 - $15,000		None	
	United Health Care	$15,001 - $50,000	Dividends	$1 - $200	
	YPF Sociedad Anonima	$15,001 - $50,000	Dividends	$201 - $1,000	

SCHEDULE III -- ASSETS AND "UNEARNED" INCOME

	Cypress-Frbnks TX Indep School District Due 2/15/06	$1,001 - $15,000	Interest	$201 - $1,000	
	Fort Bend TX Indep School District Due 2/15/03	$1,001 - $15,000	Interest	$201 - $1,000	
	Houston TX Indep School District Due 8/15/11	$1,001 - $15,000	Interest	$1 - $200	
	Lewisville TX Indep School District Due 8/15/07	$15,001 - $50,000		None	
	INSD MUN INCM TR SR 86 UT SER 86 SEMI ANNU	$1,001 - $15,000	Dividends	$201 - $1,000	
	INSD MUNI INCM TR UNIT SR 200	$1,001 - $15,000	Dividends	$1 - $200	S
	INSD MUNI INCM TR SER 240	$1,001 - $15,000	Dividends	$1 - $200	
	TX INSD MUNI INCM TR SER 31	$1,001 - $15,000	Dividends	$1 - $200	
	AT & T	$15,001 - $50,000	Dividends	$201 - $1,000	
	Allied Signal Inc	$15,001 - $50,000	Dividends	$201 - $1,000	S, P
	Burlington NTHN Santa Fe	$1,001 - $15,000	Dividends	$1 - $200	
	Edwards A G Inc Holding	$15,001 - $50,000	Dividends	$201 - $1,000	
	El Paso Electric Co	$1 - $1,000		None	
	General Motors Corp CL H	$1,001 - $15,000	Dividends	$1 - $200	
	GTE Corporation	$15,001 - $50,000	Dividends	$201 - $1,000	
	International Paper Co	$1,001 - $15,000	Dividends	$201 - $1,000	
	Johnson & Johnson	$1,001 - $15,000	Dividends	$1 - $200	
	KMart Corporation	$1,001 - $15,000		None	
	Lab Corp of America Hldg	$1 - $1,000		None	

SCHEDULE III -- ASSETS AND "UNEARNED" INCOME

	Merck & Co Inc	$50,001 - $100,000	Dividends	$1,001 - $2,500	
	PPG Industries	$50,001 - $100,000	Dividends	$1,001 - $2,500	
	SBC Communications	$15,001 - $50,000	Dividends	$201 - $1,000	
	Santa Fe Energy Res Inc	$1,001 - $15,000		None	
	Newmont Mining (merger with Santa Fe Pacific Gold)	$1,001 - $15,000	Dividends	$1 - $200	
	WMX Technologies Inc	$15,001 - $50,000	Dividends	$201 - $1,000	
	21 12 Acres, Northern Dona Ana Cty , NM (1/24 interest)	$1,001 - $15,000	Rent	None	
	220 N Mesa, El Paso, TX (1/12 interest)	$15,001 - $50,000	Rent	$1,001 - $2,500	
	711 N Piedras, El Paso, TX (1/12 interest)	$1,001 - $15,000	Rent	$201 - $1,000	
	Congressional Federal Credit Union	$15,001 - $50,000	Interest	$1,001 - $2,500	
	1/12 interest in note from Sam & Halim Kaileh	None	Interest	$1 - $200	Note Paid
	Janus Overseas	$1,001 - $15,000	Dividends	$2,501 - $5,000	P, S
	1/4 est undivided int in Corpus of Mary S Crowell Trust	$1,001 - $15,000	Interest	$201 - $1,000	
	1/4 est undivided interest in Estate of Catherine Belk	$15,001 - $50,000	Interest	$2,501 - $5,000	
	Applied Materials	None		None	S
	Lowes Companies Inc	$15,001 - $50,000	Dividends	$1 - $200	P
	Case Corp	None	Dividends	None	S
	Compaq Computer Corp	None		None	S
	Dell Computer Corp	None		None	S

SCHEDULE III -- ASSETS AND "UNEARNED" INCOME

	Gap Inc	None	Dividends	$1 - $200	S
	Texas Instruments Inc	None	Dividends	None	S
	Tidewater Inc	None	Dividends	$1 - $200	P, S
	Invesco Balanced Fund	$100,001 - $250,000	Dividends	$5,001 - $15,000	P
	Warburg Pincus Cap Apprec Fund	$100,001 - $250,000	Dividends	$15,001 - $50,000	P
	Lucent Technologies	$1,001 - $15,000	Dividends	$1 - $200	
	Electronic Data Systems	$15,001 - $50,000	Dividends	$201 - $1,000	P
	NCR Corp	$1 - $1,000		None	
	American Century 20th Ultra Shares	$100,001 - $250,000	Dividends	$15,001 - $50,000	P
	Franklin Mutual Shares Fund	$50,001 - $100,000	Dividends	$5,001 - $15,000	P
	Vanguard Convertible Shares	$250,001 - $500,000	Dividends	$15,001 - $50,000	P
	Vanguard Equity Income Shares	None	Dividends	$1,001 - $2,500	P, S
	Vanguard FIS LT Corp Shares	$500,001 - $1,000,000	Dividends	$50,001 - $100,000	P
	Vanguard Int Growth Shares	None	Dividends	None	S
	Vanguard Growth US Shares	$500,001 - $1,000,000	Dividends	$15,001 - $50,000	P
	Ericsson L M Tel Co	None	Dividends	$1 - $200	P, S
	Advanced Micro Devices	None		None	P, S
	American Home Products	None	Dividends	$201 - $1,000	P, S
	Amgen	$15,001 - $50,000		None	P
	Barrett Resources Corp	$15,001 - $50,000		None	P
	Bayard Drilling Techs	$1,001 - $15,000		None	P
	Cisco Sys Inc	$15,001 - $50,000		None	P

SCHEDULE III -- ASSETS AND "UNEARNED" INCOME

	Cadence	$1,001 - $15,000		None	P, S
	DSC Communications Corp	$1,001 - $15,000		None	P
	ENSCO Intl Inc	$15,001 - $50,000	Dividends	$1 - $200	P, S
	Estee Lauder Companies	$15,001 - $50,000	Dividends	$1 - $200	P
	R & B Falcon Corp	$15,001 - $50,000		None	P
	Federal Home Loan Mtg Corp	$15,001 - $50,000	Dividends	$201 - $1,000	P
	Hewlett-Packard Co	$15,001 - $50,000	Dividends	$1 - $200	P
	Input-Output	$15,001 - $50,000		None	P
	Intel	$15,001 - $50,000		None	P
	Kimberly Clark Corp	$15,001 - $50,000	Dividends	$201 - $1,000	P
	Micron Technology Inc	$1,001 - $15,000		None	P
	Noble Drilling	$50,001 - $100,000		None	P
	Sonat	$15,001 - $50,000	Dividends	$201 - $1,000	P
	Sun Microsystems Inc	$15,001 - $50,000		None	P
	Tetra Techs Inc Del	None		None	P, S
	Tuboscope Vetco Intl	None		None	P, S
	United Meridian Corp	$1,001 - $15,000		None	P
	Raytheon Class A (Spinoff of General Motors)	$1,001 - $15,000		None	Spinoff
	Evergreen Global RE	None		None	S
	Call Ensco intl Inc	None	Option Contract Price	$1,001 - $2,500	
	Call Electronic Data	None	Option Contract Price	$201 - $1,000	
	Call American Home Products	None	Option Contract Price	$201 - $1,000	

SCHEDULE III -- ASSETS AND "UNEARNED" INCOME

	Call Allied Signal Inc	None	Option Contract Price	$201 - $1,000	
	Call Applied Materials	None	Option Contract Price	$2,501 - $5,000	
	Call Sonat Inc	None	Option Contract Price	$201 - $1,000	
	Call Estee Lauder Co	None	Option Contract Price	$201 - $1,000	
	Call Federal Home Loan Mtg	None	Option Contract Price	$1,001 - $2,500	
	Call Mercantile Bancorp	None	Option Contract Price	$1,001 - $2,500	
	Call Barrett Res Corp	None	Option Contract Price	$201 - $1,000	
	Call Barrett Res Corp	None	Option Contract Price	$1,001 - $2,500	
	Call United Healthcare	None	Option Contract Price	$1,001 - $2,500	
	Call Micron Tech Inc	None	Option Contract Price	$1,001 - $2,500	
	Call Kimberly-Clark Corp	None	Option Contract Price	$1,001 - $2,500	
	Call United Meridian	None	Option Contract Price	$201 - $1,000	
	Call DSC Communications	None	Option Contract Price	$201 - $1,000	
	Call Noble Drilling	None	Option Contract Price	$1,001 - $2,500	
	Call Hewlett-Packard Co	None	Option Contract Price	$201 - $1,000	
	Call Federal Home Loan Mtg	None	Option Contract Price	$1,001 - $2,500	
	Call R & B Falcon Corp	None	Option Contract Price	$2,501 - $5,000	
	Call Cisco	None	Option Contract Price	$2,501 - $5,000	
	Call Estee Lauder	None	Option Contract Price	$1,001 - $2,500	
	Call Tetra Techs Inc Del	None	Option Contract Price	$1,001 - $2,500	
	Call Cadence Designs	None	Option Contract Price	$1,001 - $2,500	
	Call Lowes Companies Inc	None	Option Contract Price	$1,001 - $2,500	

SCHEDULE III -- ASSETS AND "UNEARNED" INCOME

	Call American Home Products Corp	None	Option Contract Price	$1,001 - $2,500	
	Call Ensco Intl Corp	None	Option Contract Price	$1,001 - $2,500	
	Call Sun Microsystems	None	Option Contract Price	$2,501 - $5,000	
	Call Sonat Inc	None	Option Contract Price	$1,001 - $2,500	
	Call Amgen Inc	None	Option Contract Price	$1,001 - $2,500	
	Call IBM	None	Option Contract Price	$201 - $1,000	
	Call Advanced Micro Devices	None	Option Contract Price	$1,001 - $2,500	
	Call Boeing Co	None	Option Contract Price	$201 - $1,000	
	Call Ericsson L M	None	Option Contract Price	$201 - $1,000	
	Call DSC Communications	None	Option Contract Price	$201 - $1,000	
	Call Tuboscope Vetco	None	Option Contract Price	$1,001 - $2,500	
	Call IBM	None	Option Contract Price	$1,001 - $2,500	
	Call Input/Output Inc	None	Option Contract Price	$1,001 - $2,500	
	Call General Motors Corp	None	Option Contract Price	$201 - $1,000	
	Call Gap Inc	None	Option Contract Price	$201 - $1,000	
	Call Intel Corp	None	Option Contract Price	$2,501 - $5,000	
	Call Noble Drilling	None	Option Contract Price	$201 - $1,000	
	Call Micron Tech Inc	None	Option Contract Price	$201 - $1,000	
	Call Tidewater Inc	None	Option Contract Price	$1,001 - $2,500	
	Call Hewlett-Packard Co	None	Option Contract Price	$1,001 - $2,500	
	Call Motorola Inc	None	Option Contract Price	$2,501 - $5,000	
	Call Hewlett-Packard Co	None	Option Contract Price	$1,001 - $2,500	

SCHEDULE III -- ASSETS AND "UNEARNED" INCOME

Call Cross Timbers Oil	None	Option Contract Price	$1,001 - $2,500	
Call Sun Microsystems	None	Option Contract Price	$1,001 - $2,500	
Call Barrett Res Corp	None	Option Contract Price	$201 - $1,000	
Call Oracle Corp	None	Option Contract Price	$201 - $1,000	
Call Kimberly-Clark Corp	None	Option Contract Price	$201 - $1,000	
Call Electronic Data	None	Option Contract Price	$201 - $1,000	
Call Cadence Designs	None	Option Contract Price	$201 - $1,000	
Call Micron Tech Inc	None	Option Contract Price	$201 - $1,000	

SCHEDULE IV -- TRANSACTIONS

Report any purchase, sale, or exchange by you, your spouse, or dependent child during the reporting year of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child, or the purchase or sale of your personal residence, unless it is rented out. For further information, see Instructions, pages 20-21.

SP,DC,JT	Asset	Type of Transaction	Date	Amount of Transaction
Example	Mega Corporation Common Stock	Purchase	10/12/94	$15,001 - $50,000
	Oakmark, Int Shares	Purchase	97/04/28 and dividends reinvestment	$100,001 - $250,000
	American Century 20th Ultra Shares	Purchase	97/12	$15,001 - $50,000
	Franklin Mutual Shares Fund	Purchase	97/05/01 and dividends reinvestment	$15,001 - $50,000
	Vanguard Convertible Shares	Purchase	QTR	$15,001 - $50,000
	Vanguard Equity Inc Shares	Purchase	QTR	$1,001 - $15,000
	Vanguard FIS LT Corp Shares	Purchase	QTR	$50,001 - $100,000
	Invesco Small Co Growth, (was Emerging Growth Shares)	Purchase	QTR	$15,001 - $50,000
	Price Science and Tech Shares	Purchase	97/12	$15,001 - $50,000
	Vanguard Growth US Shares	Purchase	97/01/14 and dividends reinvestment	$250,001 - $500,000
	Vanguard Int Growth Shares	Sold	97/09/22	$100,001 - $250,000
	Vanguard International Value, (was Trustees Int Shares)	Purchase	QTR	$15,001 - $50,000
	Charles Schwab Money Market Shares	Purchase	96/12/26, Daily	$100,001 - $250,000
	Charles Schwab Tax Exempt MM	Purchase	Daily	$15,001 - $50,000
	IBM Stock	Purchase	97/07/24 and dividends reinvestment	$15,001 - $50,000

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SCHEDULE IV -- TRANSACTIONS

Report any purchase, sale, or exchange by you, your spouse, or dependent child during the reporting year of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child, or the purchase or sale of your personal residence, unless it is rented out. For further information, see Instructions, pages 20-21.

SP,DC,JT	Asset	Type of Transaction	Date	Amount of Transaction
	Example Mega Corporation Common Stock	Purchase	10/12/94	$15,001 - $50,000
	Mutual of America 403 B	Purchase	QTR	$1,001 - $15,000
	General Motors Corp	Sold	97/09/22	$15,001 - $50,000
	Motorola Incorporated	Sold	97/07/21	$50,001 - $100,000
	Oppenheimer Multi Sector Shares	Purchase	Monthly	$1,001 - $15,000
	Warburg Pincus Cap Apprec Fund	Purchase	QTR	$15,001 - $50,000
	Fedl Natl Mtg Assn	Sold	97/01/20	$15,001 - $50,000
	Invesco Balanced Fund	Purchase	QTR	$1,001 - $15,000
	Founders Growth Shares	Sold	97/12/11	$50,001 - $100,000
	Compaq Comp	Sold	97/01/20	$15,001 - $50,000
	Evergreen Global RE	Sold	97/04/28	$100,001 - $250,000
	Advanced Micro Devices	Sold	97/12/29	$1,001 - $15,000
	Allied Signal Inc	Sold	97/06/23	$15,001 - $50,000
	American Home Products Corp	Sold	97/07/21	$15,001 - $50,000
	Cadence Design Systems	Sold	97/11/24	$15,001 - $50,000
	Cross Timbers Oil Co	Sold	97/11/24	$1,001 - $15,000
	Dell Computers	Sold	97/01/20	$15,001 - $50,000
	Ensco Intl Inc	Sold	97/09/22	$15,001 - $50,000

SCHEDULE IV -- TRANSACTIONS

Report any purchase, sale, or exchange by you, your spouse, or dependent child during the reporting year of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child, or the purchase or sale of your personal residence, unless it is rented out. For further information, see Instructions, pages 20-21.

SP,DC,JT	Asset	Type of Transaction	Date	Amount of Transaction
	Example Mega Corporation Common Stock	Purchase	10/12/94	$15,001 - $50,000
	Ericsson L M Tel Co	Sold	97/07/21	$15,001 - $50,000
	Kirby Corp	Sold	97/02/24	$15,001 - $50,000
	Mercantile Bancorp Inc	Sold	97/09/17	$15,001 - $50,000
	Microsoft Corporation	Sold	97/04/21	$50,001 - $100,000
	Oracle Corp	Sold	97/01/20	$15,001 - $50,000
	Tetra Techs Inc Del	Sold	97/12/30	$15,001 - $50,000
	Thornburg Mtg Asset Corp	Sold	97/02/20	$50,001 - $100,000
	Tidewater	Sold	97/01/20	$15,001 - $50,000
	Tidewater	Sold	97/10/10	$1,001 - $15,000
	Tidewater	Sold	97/10/20	$1,001 - $15,000
	Heartland Value Plus	Purchase	Dividends Reinvestment	$15,001 - $50,000
	Case Corp	Sold	97/01/20	$15,001 - $50,000
	Gap Inc	Sold	97/09/22	$15,001 - $50,000
	Texas Instruments Inc	Sold	97/01/20	$50,001 - $100,000
	Tidewater Inc	Purchase	97/05/23	$15,001 - $50,000
	Lowes Companies	Purchase	97/09/24	$15,001 - $50,000
	Janus Twenty Fund Shares	Purchase	QTR	$1,001 - $15,000

SCHEDULE IV -- TRANSACTIONS

Report any purchase, sale, or exchange by you, your spouse, or dependent child during the reporting year of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child, or the purchase or sale of your personal residence, unless it is rented out. For further information, see Instructions, pages 20-21.

SP,DC,JT	Asset	Type of Transaction	Date	Amount of Transaction
	Example Mega Corporation Common Stock	Purchase	10/12/94	$15,001 - $50,000
	Electronic Data Systems	Purchase	97/02/04	$15,001 - $50,000
	Applied Materials	Sold	97/10/20	$15,001 - $50,000
	Advanced Micro Devices	Purchase	97/07/23	$15,001 - $50,000
	Allied Signal Inc	Purchase	97/04/21	$15,001 - $50,000
	American Home Products Corp	Purchase	97/01/29	$15,001 - $50,000
	Amgen	Purchase	97/06/24	$15,001 - $50,000
	Barrett Resources Corp	Purchase	97/06/25	$15,001 - $50,000
	Bayard Drilling Techs	Purchase	97/11/04	$1,001 - $15,000
	Boeing Co	Purchase	97/09/24	$15,001 - $50,000
	Cisco Sys Inc	Purchase	97/10/28	$15,001 - $50,000
	Cadence Design Systems	Purchase	97/04/21	$1,001 - $15,000
	DSC Communications Corp	Purchase	97/07/23	$1,001 - $15,000
	Ensco Intl Inc	Purchase	97/04/22	$15,001 - $50,000
	Ericsson L M Tel Co	Purchase	97/04/21	$15,001 - $50,000
	Estee Lauder Companies	Purchase	97/06/25	$15,001 - $50,000
	R & B Falcon Corp	Purchase	97/10/29	$15,001 - $50,000
	Fedl Home Loan Mtg Corp	Purchase	97/01/28	$15,001 - $50,000
	Hewlett-Packard Company	Purchase	97/02/18	$15,001 - $50,000

SCHEDULE IV -- TRANSACTIONS

Report any purchase, sale, or exchange by you, your spouse, or dependent child during the reporting year of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child, or the purchase or sale of your personal residence, unless it is rented out. For further information, see Instructions, pages 20-21.

SP,DC,JT	Asset	Type of Transaction	Date	Amount of Transaction
	Example Mega Corporation Common Stock	Purchase	10/12/94	$15,001 - $50,000
	Input/Output Inc	Purchase	97/02/04	$15,001 - $50,000
	Intel Corp	Purchase	97/10/29	$15,001 - $50,000
	Kimberly Clark Corp	Purchase	97/04/21	$15,001 - $50,000
	Micron Technology Inc	Purchase	97/04/21	$15,001 - $50,000
	Noble Drilling Corp	Purchase	97/02/21	$15,001 - $50,000
	Noble Drilling Corp	Purchase	97/06/25	$15,001 - $50,000
	Oracle Corp	Purchase	97/09/24	$15,001 - $50,000
	Sonat Inc	Purchase	97/07/14	$15,001 - $50,000
	Sun Microsystems	Purchase	97/02/18	$15,001 - $50,000
	Tetra Techs Inc Del	Purchase	97/06/24	$15,001 - $50,000
	Tuboscope Vetco Intl	Purchase	97/06/25	$15,001 - $50,000
	United Meridian Corp	Purchase	97/09/24	$15,001 - $50,000
	Tuboscope Inc	Sold	97/11/24	$15,001 - $50,000
	Heartland Value Plus	Purchase	97/03/25	$50,001 - $100,000
	Heartland Value Plus	Purchase	97/09/22	$15,001 - $50,000
	Heartland Value Plus	Purchase	97/01/13	$50,001 - $100,000
	Heartland Value Plus	Purchase	97/01/16	$50,001 - $100,000
	Selected American Shares	Purchase	97/01/13	$100,001 - $250,000

SCHEDULE IV -- TRANSACTIONS

Report any purchase, sale, or exchange by you, your spouse, or dependent child during the reporting year of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child, or the purchase or sale of your personal residence, unless it is rented out. For further information, see Instructions, pages 20-21.

SP,DC,JT	Asset	Type of Transaction	Date	Amount of Transaction
	Example Mega Corporation Common Stock	Purchase	10/12/94	$15,001 - $50,000
	Selected American Shares	Purchase	97/04/22	$50,001 - $100,000
	Vanguard Primecap Shares	Purchase	97/09/22	$100,001 - $250,000
	Janus Overseas	Purchase	97/03/18	$100,001 - $250,000
	Janus Overseas	Sold	97/09/22	$100,001 - $250,000
	Vanguard Municipal Bond Fund (Money Market)	Purchase	QTR	$1,001 - $15,000
	Selected American Shares	Purchase	Dividends Reinvestment	$15,001 - $50,000
	INSD MUNI INCM TR UNIT SR 200	Sold	97/01/25	$1,001 - $15,000
	Janus Overseas	Purchase	97/12/30, Dividends Reinvestment	$1,001 - $15,000
	Vanguard Equity Income Shares	Sold	97/09/22	$100,001 - $250,000

SCHEDULE V -- LIABILITIES

Report liabilities of over $10,000 owed to any one creditor ***at any time*** during the reporting period by you, your spouse, or dependent child. Mark the highest amount owed during the year.
Exclude: Any mortgage on your personal residence (unless it is rented out), loans secured by automobiles, household furniture, or appliances, and liabilities owed to a spouse, or the child, parent, or sibling of you or your spouse. Report ***revolving charge accounts*** only if the balance at the end of the reporting period exceeded $10,000. For further information, see Instructions, pages 21-22.

SP,DC,JT	Creditor	Type of Liability	Amount of Liability
	Example: First Bank of Wilmington, Delaware	Mortgage on 123 Main St., Dover, Del	$100,001 - $250,000
	Simmons 1st National Bank, Little Rock, Ark (1/4)	Mortgage 1510 Ullrich, 508 Gatetree, Austin, TX	$50,001 - $100,000

SCHEDULE VII -- TRAVEL PAYMENTS AND REIMBURSEMENTS

Identify the source and list travel itinerary, dates, and nature of expenses provided for travel and travel-related expenses totalling more than $250 received by you, your spouse, or a dependent child during the reporting period. Indicate whether a family member accompanied the traveler at the sponsor's expense, and the amount of time, if any, that was not at the sponsor's expense. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor.
Exclude: Travel-related expenses provided by federal, state and local governments, or by a foreign government required to be separately reported under the Foreign Gifts and Decorations Act (5 U.S.C. 7342), travel paid for by a Federal political committee, travel provided to a spouse or dependent child that is totally independent of his or her relationship to you. For further information, see Instructions, pages 24-26

Source	Date(s)	Point of Departure--Destination--Point of Return	Lodging? (Y/N)	Food? (Y/N)	Was a Family Member Included? (Y/N)	Any time not at sponsor's expense
Examples Chicago Chamber of Commerce	Mar 2	Wash., D.C.-Chicago-Wash., D.C.	N	N	N	N
Mega Corporation	Aug 6-13	Wash., D.C.-Los Angeles-Cleveland	Y	Y	Y	4 Days
The Aspen Institute	Feb 14-17, 1997	Washington DC - Manalapan, FL - Austin TX	Y	Y	Y	none
The Aspen Institute	March 7-9, 1997	Washington DC - Hershey, PA - Washington DC	N	Y	Y	none
Turkish-US Business Council of the Foreign Economic Relations Board of Turkey	March 22 - April 5, 1997	US - Istanbul, Ankara, Izmir, Turkey - US	Y	Y	Y	9 days
The Aspen Institute	Aug 15 - Sept 1, 1997	US - Dresden, Germany - US	Y	Y	Y	11 days
No public funds were used for the above educational travel, which complied with the terms of the rule limiting receipt of gifts						

SCHEDULE VIII -- POSITIONS

Report all positions, compensated or uncompensated, held during the current calendar year as an officer, director, trustee of an organization, partner, proprietor, representative, employee, or consultant of any corporation, firm, partnership, or other business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States. For further information, see Instructions, page 26

Exclude: Positions held in any religious, social, fraternal, or political entities, positions solely of an honorary nature, and positions listed on Schedule I.

Position	Organization
Partner	Perlmutter, Marston, Jacks & Doggett
	(Owns 1510 Ullrich, 508 Gatetree, Austin)

LLOYD DOGGETT
10TH DISTRICT, TEXAS

COMMITTEE ON THE BUDGET

COMMITTEE ON RESOURCES

RECEIVED
98 MAY 15 PM 2:33

HAND DELIVERED

WASHINGTON OFFICE
126 CANNON BUILDING
WASHINGTON, DC 20515
(202) 225-4865

DISTRICT OFFICE
763 FEDERAL BUILDING
AUSTIN, TX 78701
(512) 916-5921

e-mail: lloyd.doggett@mail.house.gov
http://www.house.gov/doggett/

I 97

Congress of the United States
House of Representatives

May 15, 1998

① ✓ ML

The Honorable Robin H. Carle
Clerk of the House
H-154 U S Capitol
Washington, D.C. 20515

Dear Robin:

Please amend my 1995 and 1996 Financial Disclosure reports to reflect on Schedule III my continued ownership of a vacant lot at 3800 Kennelwood in Austin, TX valued between $100,001-250,000. This represents a portion of the property included in my initial disclosure filed in 1994 and then as partially sold, with the remainder valued at $50,000-$100,000, in my calendar year 1994 report filed 5/15/95. No income is earned from this lot but its value was omitted from the subsequent reports.

Additionally, in the 1996 report, the value for the following securities on Schedule III should have been NONE, since each was sold during 1996 as shown accurately on Schedule IV: Dover Corp., Excel Commns Inc

Your attention to this matter is appreciated

Sincerely,

Lloyd Doggett

LD:pjm

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UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1997

FORM A
For use by Members, officers, and employees

Cal Dooley
(Full Name)

U.S. House of Representatives, 1201 Longworth House Ofc.
(Mailing Address)

Washington, D.C. 20515

Daytime Telephone: 202/225-3341

MC (Office Use Only)

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Filer Status
[X] Member of the U.S. House of Representatives — State CA, District 20
[ ] Officer or Employee — Employing Office

Report Type
[X] Annual (May 15)
[ ] Amendment
[ ] Termination — Termination Date

A *$200 penalty* shall be assessed against anyone who files more than 30 days late.

PRELIMINARY INFORMATION — ANSWER EACH OF THESE QUESTIONS

I. Did you or your spouse have "earned" income (e.g., salaries or fees) of $200 or more from any source in the reporting period? **If yes, complete and attach Schedule I.** Yes [X] No [ ]

II. Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? **If yes, complete and attach Schedule II.** Yes [X] No [ ]

III. Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? **If yes, complete and attach Schedule III.** Yes [X] No [ ]

IV. Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset worth more than $1,000 in the reporting period? **If yes, complete and attach Schedule IV.** Yes [X] No [ ]

V. Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? **If yes, complete and attach Schedule V.** Yes [X] No [ ]

VI. Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $250 and not otherwise exempt)? **If yes, complete and attach Schedule VI** Yes [ ] No [X]

VII. Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $250 from one source)? **If yes, complete and attach Schedule VII.** Yes [X] No [ ]

VIII. Did you hold any reportable positions on or before the date of filing in the current calendar year? **If yes, complete and attach Schedule VIII.** Yes [X] No [ ]

IX. Did you have any reportable agreement or arrangement with an outside entity? **If yes, complete and attach Schedule IX.** Yes [ ] No [X]

Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION — ANSWER EACH OF THESE QUESTIONS

TRUSTS—Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child? Yes [ ] No [X]

EXEMPTION—Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption? Yes [ ] No [X]

CERTIFICATION — THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended. The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct or its designee. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil penalties and criminal sanctions (*See* 5 U.S.C. app. 4, §104 and 18 U.S.C. §1001).

SIGNATURE OF REPORTING INDIVIDUAL: Cal Dooley

DATE (Month/Day/Year): 05/15/98

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SCHEDULE I — EARNED INCOME

List the source, type, and amount of earned income from any source (other than the filer's current employment by the U.S. Government) totalling $200 or more during the preceding calendar year. For a spouse, list the source and amount of any honoraria; list only the source for other spouse earned income exceeding $1,000.

	Source	Type	Amount
Examples	Keene State	Approved Teaching Fee	$6,000
	State of Maryland	Legislative Pension	$9,000
	Civil War Roundtable (Oct. 2nd)	Spouse Speech	$1,000
	Ontario County Board of Education	Spouse Salary	NA
	Georgetown University, Washington, D.C.	Spouse salary	NA

For payments to charity in lieu of honoraria, use Schedule II.

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Name Cal Dooley	Page 3 of 10

SCHEDULE II — PAYMENTS IN LIEU OF HONORARIA MADE TO CHARITY

List the source, activity (i.e., speech, appearance, or article), date, and amount of any payment made by the sponsor of an event to a charitable organization in lieu of an honorarium. A separate confidential list of charities receiving such payments must be filed directly with the Committee on Standards of Official Conduct. An envelope for transmitting the list is included in each Member's filing package.

Source	Activity	Date	Amount
Examples Association of American Associations, Wash., D.C.	Speech	Feb. 2, 1997	$2,000
XYZ Magazine	Article	Aug. 13, 1997	$500
Philip Morris Companies, Inc. (Kraft Foods, Inc.)	Speech	09/23/97	$2,000

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SCHEDULE III — ASSETS AND "UNEARNED" INCOME

BLOCK A — Asset and/or Income Source

Identify (a) each asset held for investment or production of income with a fair market value exceeding $1,000 at the end of the reporting year, and (b) any other asset or source of income which generated more than $200 in "unearned" income during the year. For rental property or land, provide an address. Provide full names of any mutual funds. For an IRA or retirement plan that is *self-directed*, list the underlying assets worth more than $1,000. For an IRA or retirement plan that is not self-directed, name the institution holding the account.

Exclude: Your personal residence(s) (unless there is rental income), any debt owed to you by your spouse, or by your or your spouse's child, parent, or sibling, any deposits totalling $5,000 or less in personal savings accounts; any financial interests in or income derived from U.S. Government retirement programs.

If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC) or is jointly held (JT), in the optional column on the far left.

BLOCK B — Value of Asset

at close of reporting year. If you use a valuation method other than fair market value, please specify the method used. If an asset was sold and is included only because it generated income, the value should be "None."

BLOCK C — Type of Income

BLOCK D — Amount of Income

For IRA's and retirement plans that are *not* self-directed, you may write in "NA" for income

BLOCK E — Transaction

Indicate if asset was purchased (P), sold (S), or exchanged (E) in reporting year

	BLOCK A	BLOCK B												BLOCK C								BLOCK D											BLOCK E
		A None	B $1 – $1,000	C $1,001 – $15,000	$15,001 – $50,000	E $50,001 – $100,000	F $100,001 – $250,000	G $250,001 – $500,000	H $500,001 – $1,000,000	I $1,000,001 – $5,000,000	J $5,000,001 – $25,000,000	K $25,000,001 – $50,000,000	L Over $50,000,000	DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Type of Income (Specify. For Example: Partnership Income or Farm Income)	I None	II $1 – $200	III $201 – $1,000	IV $1,001 – $2,500	V $2,501 – $5,000	VI $5,001 – $15,000	VII $15,001 – $50,000	VIII $50,001 – $100,000	IX $100,001 – $1,000,000	X $1,000,001 – $5,000,000	XI Over $5,000,000	P, S, E, P
SP																																	
DC	*Examples*		Indefinite																	Royalties													
JT																																	
SP	Mega Corp. Stock					X								X																			P
JT	1st Bank of Paducah, KY accounts						X									X										X							
	Dooley Farms Partnership (inc. equipment, crops, leased improvements on 120 acres in Visalia and Tulare)							X												Farm income							X (net)	X	(gross)				
	1/3 interest in 60 acres, Webb Ranch & McAuliffe Ave.								X								X											X					Transfer to Packwood
	Dooley for Congress (loan)			X																No income	X												

For additional assets and unearned income, use next page.

1003

SCHEDULE III — ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Name: Cal Dooley | Page 5 of 10

SP. DC. JT	BLOCK A Asset and/or Income Source	BLOCK B Year-End Value of Asset												BLOCK C Type of Income							BLOCK D Amount of Income										BLOCK E Transaction
		A None	B $1 – $1,000	C $1,001 – $15,000	D $15,001 – $50,000	E $50,001 – $100,000	F $100,001 – $250,000	G $250,001 – $500,000	H $500,001 – $1,000,000	I $1,000,001 – $5,000,000	J $5,000,001 – $25,000,000	K $25,000,001 – $50,000,000	L Over $50,000,000	DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Type of Income (Specify)	I None	II $1 – $200	III $201 – $1,000	IV $1,001 – $2,500	V $2,501 – $5,000	VI $5,001 – $15,000	VII $15,001 – $50,000	VIII $50,001 – $100,000	IX $100,001 – $1,000,000	X $1,000,001 – $5,000,000	XI Over $5,000,000	P, S, E
	Congressional Federal Credit Union			X												X								X							
	Calcot Limited			X																Combined with farm income, listed above											
	County Line Gin			X																Combined with farm income, listed above											
	Diamond Walnut			X																Combined with farm income, listed above											
	Packwood RE Partnership (25% share), 24 acres at Feemstra & McAuliffe						X													Partnership income						X					
	American Funds: The Investment Co. of America				X									X										X							
	American Funds: The New Economy Fund				X									X										X							
	American Funds: New Perspective Fund				X									X										X							
	American Funds: Washington Mutual Investors Fund				X									X										X							
	American Funds: Europacific Growth Funds			X										X										X							
	Packwood RE Packwood (loan)						X													None	X										

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SCHEDULE IV — TRANSACTIONS

Name Cal Dooley | Page 6 of 10

SP, DC, JT	Asset	Type of Transaction: PURCHASE	SALE	EXCHANGE	Date (MO/DAY/YR)	Amount of Transaction: B $1,001–$15,000	C $15,001–$50,000	D $50,001–$100,000	E $100,001–$250,000	F $250,001–$500,000	G $500,001–$1,000,000	H $1,000,001–$5,000,000	I $5,000,001–$25,000,000	J $25,000,001–$50,000,000	K Over $50,000,000
SP	*Example* Mega Corporation Common Stock	X			10–12–97		X								
	Sale of lots: Packwood RE Partnership		X		1/21/97–12/24/97		X								

Report any purchase, sale, or exchange by you, your spouse, or dependent child during the reporting year of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child, or the purchase or sale of your personal residence, unless it is rented out.

This page may be copied if more space is required.

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SCHEDULE V — LIABILITIES

Report liabilities of over $10,000 owed to any one creditor ***at any time*** during the reporting period by you, your spouse, or dependent child. Mark the highest amount owed during the year. **Exclude:** Any mortgage on your personal residence (unless it is rented out), loans secured by automobiles, household furniture, or appliances, and liabilities owed to a spouse, or the child, parent, or sibling of you or your spouse. Report ***revolving charge accounts*** only if the balance at the end of the reporting period exceeded $10,000.

SP, DC, JT	Creditor	Type of Liability	Amount of Liability									
			B $10,001–$15,000	C $15,001–$50,000	D $50,001–$100,000	E $100,001–$250,000	F $250,001–$500,000	G $500,001–$1,000,000	H $1,000,001–$5,000,000	I $5,000,001–$25,000,000	J $25,000,001–$50,000,000	K Over $50,000,000
	Example First Bank of Wilmington, Delaware	Mortgage on 123 Main St., Dover, Del				X						
	Mineral King (50% share)	Mortgage on McAuliffe & Walnut			X							
	Mineral King	Crop loan (Dooley Farms Partnership)		X								
	Case International	Tractor loan (Dooley Farms Partnership)	X									
	Visalia Community Bank (25% share)	Packwood RE Partnership development loan		X								
	Robert Merrill (25% share)	Packwood RE Partnership development loan			X							

(con't next page)

SCHEDULE VI — GIFTS

Report the source, a brief description, and the value of all gifts totalling more than $250 received by you, your spouse, or a dependent child from any source during the year.

Exclude: Gifts from relatives, gifts of personal hospitality of an individual, local meals, and gifts to a spouse or dependent child that are totally independent of his or her relationship to you. Gifts with a value of $100 or less need not be added towards the $250 disclosure threshold.

Note: The gift rule (House Rule 51) prohibits gifts except as specifically provided in the rule.

Source	Description	Value
Example Mr. Joseph H. Smith, Anytown, Anystate	Silver Platter (determination on personal friendship received from Committee on Standards)	$270

Use additional sheets if more space is required.

Name	Cal Dooley	Page 8 of 10

SCHEDULE V — LIABILITIES (con't from previous page)

Report liabilities of over $10,000 owed to any one creditor ***at any time*** during the reporting period by you, your spouse, or dependent child. Mark the highest amount owed during the year. **Exclude:** Any mortgage on your personal residence (unless it is rented out); loans secured by automobiles, household furniture, or appliances, and liabilities owed to a spouse, or the child, parent, or sibling of you or your spouse. Report ***revolving charge accounts*** only if the balance at the end of the reporting period exceeded $10,000.

SP, DC, JT	Creditor	Type of Liability	Amount of Liability									
			B $10,001 – $15,000	C $15,001 – $50,000	D $50,001 – $100,000	E $100,001 – $250,000	F $250,001 – $500,000	G $500,001 – $1,000,000	H $1,000,001 – $5,000,000	I $5,000,001 – $25,000,000	J $25,000,001 – $50,000,000	K Over $50,000,000
Example	First Bank of Wilmington, Delaware	Mortgage on 123 Main St., Dover, Del				x						
	Bank of Visalia	Packwood RE Partnership development loan		X								

SCHEDULE VI — GIFTS

Report the source, a brief description, and the value of all gifts totalling more than $250 received by you, your spouse, or a dependent child from any source during the year.

Exclude: Gifts from relatives, gifts of personal hospitality of an individual, local meals, and gifts to a spouse or dependent child that are totally independent of his or her relationship to you. Gifts with a value of $100 or less need not be added towards the $250 disclosure threshold.

Note: The gift rule (House Rule 51) prohibits gifts except as specifically provided in the rule.

Source	Description	Value
Example Mr. Joseph H. Smith, Anytown, Anystate	Silver Platter (determination on personal friendship received from Committee on Standards)	$270

Use additional sheets if more space is required.

1007

Name	Cal Dooley	Page 9 of 10

SCHEDULE VII —TRAVEL PAYMENTS AND REIMBURSEMENTS

Identify the source and list travel itinerary, dates, and nature of expenses provided for travel and travel-related expenses totalling more than $250 received by you, your spouse, or a dependent child during the reporting period. Indicate whether a family member accompanied the traveler at the sponsor's expense, and the amount of time, if any, that was not at the sponsor's expense. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor.

Exclude: Travel-related expenses provided by federal, state, and local governments, or by a foreign government required to be separately reported under the Foreign Gifts and Decorations Act (5 U.S.C. § 7342); travel paid for by a Federal political committee, travel provided to a spouse or dependent child that is totally independent of his or her relationship to you.

Source	Date(s)	Point of Departure—Destination—Point of Return	Lodging? (Y/N)	Food? (Y/N)	Was a Family Member Included? (Y/N)	Any time not at sponsor's expense
Examples: Chicago Chamber of Commerce	Mar. 2	Wash., D.C.—Chicago—Wash., D.C.	N	N	N	N
Roycroft Corporation	Aug. 6–13	Wash., D.C.—Los Angeles—Cleveland	Y	Y	Y	4 Days
National Council of Farmer Cooperatives (split w/FCC)	1/13-1/14	Wash., D.C. - San Diego - Fresno	Y	Y	N	N
Farm Credit Council (split with NCFC)	1/13-1/14	Wash., D.C. - San Diego - Fresno	Y	Y	N	N
Family Farm Alliance	2/22-2/24	Fresno - Las Vegas	Y	Y	N	N
Aspen Institute	3/7-3/9	Wash., D.C. - Hershey, PA - Wash., D.C.	Y	Y	Y	N
Democratic Leadership Council	5/1-5/4	Wash., D.C. - Charleston, D.C. - Wash., D.C.	Y	Y	Y	N
CA Independent Petroleum Assoc.	5/31-6/1	San Diego, CA	Y	Y	N	N
American Crop Protection Association	9/26-9/28	White Sulphur Springs, W.V.	Y	Y	Y	N
Congressional Economic Leadership Institute	11/16-11/23	Wash., D.C. - Germany - France - Wash., D.C	Y	Y	Y	N
Western Regional Council	12/10-12/11	Wash., D.C. - Phoenix, AZ - Wash, D.C.	Y	Y	N	N
American Meat Institute	1/16-1/18	Sacramento - Palm Springs	Y	Y	N	N

This page may be copied if more space is required.

SCHEDULE VIII — POSITIONS

Report all positions, compensated or uncompensated, held during the current calendar year as an officer, director, trustee of an organization, partner, proprietor, representative, employee, or consultant of any corporation, firm, partnership, or other business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States.

Exclude: Positions held in any religious, social, fraternal, or political entities; positions solely of an honorary nature; and positions listed on Schedule I.

Position	Name of Organization
Partner	Dooley Farms Partnership (38% interest) -- See Schedule III
Partner	Packwood RE Partnership (25% interest) -- See Schedule III

SCHEDULE IX — AGREEMENTS

Identify the date, parties to, and general terms of any agreement or arrangement with respect to: future employment; a leave of absence during the period of government service; continuation or deferral of payments by a former or current employer other than the U.S. Government; or continuing participation in an employee welfare or benefit plan maintained by a former employer.

Date	Parties To	Terms of Agreement

GPO 1998 46-260 (mac)

Use additional sheets if more space is required.

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1997

FORM A

For use by Members, officers, and employees

98 MAY 15 PM 4:56

John Taylor Doolittle
(Full Name)

1526 Longworth HOB
(Mailing Address)

Washington, DC 20515

Daytime Telephone: (202) 225-2511

HAND DELIVERED (9)

(Office Use Only)

Filer Status: [X] Member of the U.S. House of Representatives — State CA District 04 — [ ] Officer or Employee — Employing Office

Report Type: [X] Annual (May 15) — [ ] Amendment — [ ] Termination — Terminal on Date

A *$200 penalty* shall be assessed against anyone who files more than 30 days late.

PRELIMINARY INFORMATION — ANSWER EACH OF THESE QUESTIONS

I Did you or your spouse have "earned" income (e.g., salaries or fees) of $200 or more from any source in the reporting period? **If yes, complete and attach Schedule I.** Yes [X] No [ ]

II Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? **If yes, complete and attach Schedule II.** Yes [X] No [ ]

III Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? **If yes, complete and attach Schedule III.** Yes [X] No [ ]

IV Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset worth more than $1,000 in the reporting period? **If yes, complete and attach Schedule IV.** Yes [X] No [ ]

V Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? **If yes, complete and attach Schedule V.** Yes [X] No [ ]

VI Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $250 and not otherwise exempt)? **If yes, complete and attach Schedule VI** Yes [ ] No [X]

VII Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $250 from one source)? **If yes, complete and attach Schedule VII.** Yes [X] No [ ]

VIII Did you hold any reportable positions on or before the date of filing in the current calendar year? **If yes, complete and attach Schedule VIII** Yes [X] No [ ]

IX Did you have any reportable agreement or arrangement with an outside entity? If yes, complete and attach Schedule IX. Yes [ ] No [X]

Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION — ANSWER EACH OF THESE QUESTIONS

TRUSTS—Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child? Yes [ ] No [X]

EXEMPTION—Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption? Yes [ ] No [X]

CERTIFICATION — THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended. The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct or its designee. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil penalties and criminal sanctions (*See* 5 U.S.C. app. 4 §104 and 18 U.S.C. §1001).

SIGNATURE OF REPORTING INDIVIDUAL

DATE (Month/Day/Year) 5/14/98

1010

SCHEDULE I — EARNED INCOME

List the source, type, and amount of earned income from any source (other than the filer's current employment by the U.S. Government) totalling $200 or more during the preceding calendar year. For a spouse, list the source and amount of any honoraria; list only the source for other spouse earned income exceeding $1,000.

	Source	Type	Amount
Examples	Keene State	Approved Teaching Fee	$6,000
	State of Maryland	Legislative Pension	$9,000
	Civil War Roundtable (Oct 2nd)	Spouse Speech	$1,000
	Ontario County Board of Education	Spouse Salary	NA
	Events Plus	spouse income	NA

For payments to charity in lieu of honoraria, use Schedule II.

1011

Name John T. Doolittle	Page 3 of 9

SCHEDULE II — PAYMENTS IN LIEU OF HONORARIA MADE TO CHARITY

List the source, activity (i.e., speech, appearance, or article), date, and amount of any payment made by the sponsor of an event to a charitable organization in lieu of an honorarium. A separate confidential list of charities receiving such payments must be filed directly with the Committee on Standards of Official Conduct. An envelope for transmitting the list is included in each Member's filing package

Source	Activity	Date	Amount
Examples Association of American Associations, Wash., D.C. / XYZ Magazine	Speech / Article	Feb 2, 1997 / Aug. 13, 1997	$2 000 / $500
National Meat Association	speech	Feb. 15, 1997	$1,000
National Institutes for Water Resources	speech	March 3, 1997	$250
National Water Resources Association	speech	April 11, 1997	$1,000
California Cable TV Association	speech	Aug. 15, 1997	$1,000

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SCHEDULE III — ASSETS AND "UNEARNED" INCOME

Name John T. Doolittle | Page 4 of 9

BLOCK A — Asset and/or Income Source

Identify (a) each asset held for investment or production of income with a fair market value exceeding $1,000 at the end of the reporting year, and (b) any other asset or source of income which generated more than $200 in "unearned" income during the year. For rental property or land, provide an address. Provide full names of any mutual funds. For an IRA or retirement plan that is *self-directed*, list the underlying assets worth more than $1,000. For an IRA or retirement plan that is not self-directed, name the institution holding the account.

Exclude: Your personal residence(s) (unless there is rental income), any debt owed to you by your spouse, or by your or your spouse's child, parent, or sibling, any deposits totalling $5,000 or less in personal savings accounts, any financial interests in or income derived from U.S. Government retirement programs.

If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC) or is jointly held (JT), in the optional column on the far left.

BLOCK B — Value of Asset

at close of reporting year

If you use a valuation method other than fair market value, please specify the method used.

If an asset was sold and is included only because it generated income, the value should be "None."

BLOCK C — Type of Income

BLOCK D — Amount of Income

For IRA's and retirement plans that are *not* self-directed, you may write in "NA" for income.

BLOCK E — Transaction

Indicate if asset was purchased (P), sold (S), or exchanged (E) in reporting year.

	BLOCK A	BLOCK B												BLOCK C							BLOCK D										BLOCK E
		A	B	C	D	E	F	G	H	I	J	K	L								I	II	III	IV	V	VI	VII	VIII	IX	X	XI	
		None	$1 – $1,000	$1,001 – $15,000	$15,001 – $50,000	$50,001 – $100,000	$100,001 – $250,000	$250,001 – $500,000	$500,001 – $1,000,000	$1,000,001 – $5,000,000	$5,000,001 – $25,000,000	$25,000,001 – $50,000,000	Over $50,000,000	DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Type of Income (Specify. For Example: Partnership Income or Farm Income)	None	$1 – $200	$201 – $1,000	$1,001 – $2,500	$2,501 – $5,000	$5,001 – $15,000	$15,001 – $50,000	$50,001 – $100,000	$100,001 – $1,000,000	$1,000,001 – $5,000,000	Over $5,000,000	
SP																															P, S, E
DC	*Examples*		Indefinite			X								X						Royalties											P
JT	1st Bank of Paducah KY accounts						X																								
SP	Mega Corp Stock																														
	Dominion Resources, Inc.	X												X			X					X									S
	California Legislative Retirement Systems			X										NONE								NA									
	APN #54-151-31 (Nevada County Promissory Note)			X											X					Principal				X							
	Investment Company of America (American Funds group)			X										NONE								NA									

For additional assets and unearned income, use next page

1013

SCHEDULE III — ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Name John T. Doolittle | Page 5 of 9

	BLOCK A	BLOCK B Year-End Value of Asset											BLOCK C Type of Income							BLOCK D Amount of Income										BLOCK E Transaction
SP DC JT	Asset and/or Income Source	A None	B $1 – $1,000	C $1,001 – $15,000	D $15,001 – $50,000	E $50,001 – $100,000	F $100,001 – $250,000	G $250,001 – $500,000	H $500,001 – $1,000,000	I $1,000,001 – $5,000,000	J $5,000,001 – $25,000,000	K $25,000,001 – $50,000,000	L Over $50,000,000	DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Type of Income (Specify)	I None	II $1 – $200	III $201 – $1,000	IV $1,001 – $2,500	V $2,501 – $5,000	VI $5,001 – $15,000	VII $15,001 – $50,000	VIII $50,001 – $100,000	IX $100,001 – $1,000,000	X $1,000,001 – $5,000,000	XI Over $5,000,000	P S E

This page may be copied if more space is required.

SCHEDULE IV — TRANSACTIONS

Name John T. Doolittle | Page 6 of 9

Report any purchase, sale, or exchange by you, your spouse, or dependent child during the reporting year of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child, or the purchase or sale of your personal residence, unless it is rented out.

SP, DC, JT	Asset	Type of Transaction: PURCHASE	SALE	EXCHANGE	Date (MO/DAY/YR)	Amount of Transaction: B ($1,001 – $15,000)	C ($15,001 – $50,000)	D ($50,001 – $100,000)	E ($100,001 – $250,000)	F ($250,001 – $500,000)	G ($500,001 – $1,000,000)	H ($1,000,001 – $5,000,000)	I ($5,000,001 – $25,000,000)	J ($25,000,001 – $50,000,000)	K (Over $50,000,000)
SP	*Example* Mega Corporation Common Stock	X			10-12-97		X								
	Dominion Resources		X		12-30-97	X									
	APN # 54-151-34 (Nevada County Real Estate)		X		12-15-97			X							
	APN # 54-151-34 (Nevada County water rights)		X		12-15-97	X									

This page may be copied if more space is required.

SCHEDULE V — LIABILITIES

Report liabilities of over $10,000 owed to any one creditor ***at any time*** during the reporting period by you, your spouse, or dependent child. Mark the highest amount owed during the year. **Exclude:** Any mortgage on your personal residence (unless it is rented out), loans secured by automobiles, household furniture, or appliances, and liabilities owed to a spouse, or the child, parent, or sibling of you or your spouse. Report ***revolving charge accounts*** only if the balance at the end of the reporting period exceeded $10,000.

SP, DC, JT	Creditor	Type of Liability	Amount of Liability									
			B $10,001–$15,000	C $15,001–$50,000	D $50,001–$100,000	E $100,001–$250,000	F $250,001–$500,000	G $500,001–$1,000,000	H $1,000,001–$5,000,000	I $5,000,001–$25,000,000	J $25,000,001–$50,000,000	K Over $50,000,000
	Example First Bank of Wilmington, Delaware	Mortgage on 123 Main St., Dover, Del				X						
	Congressional Federal Credit Union	Personal Credit		X								
	M&NA America	Personal Credit		X								
	Citibank	Personal Credit		X								

SCHEDULE VI — GIFTS

Report the source, a brief description, and the value of all gifts totalling more than $250 received by you, your spouse, or a dependent child from any source during the year.

Exclude: Gifts from relatives, gifts of personal hospitality of an individual, local meals, and gifts to a spouse or dependent child that are totally independent of his or her relationship to you. Gifts with a value of $100 or less need not be added towards the $250 disclosure threshold.

Note: The gift rule (House Rule 51) prohibits gifts except as specifically provided in the rule.

Source	Description	Value
Example Mr. Joseph H. Smith, Anytown, Anystate	Silver Platter (determination on personal friendship) received from Committee on Standards)	$470

Use additional sheets if more space is required.

Name John T. Doolittle | Page 8 of 9

SCHEDULE VII —TRAVEL PAYMENTS AND REIMBURSEMENTS

Identify the source and list travel itinerary, dates, and nature of expenses provided for travel and travel-related expenses totalling more than $250 received by you, your spouse, or a dependent child during the reporting period. Indicate whether a family member accompanied the traveler at the sponsor's expense, and the amount of time, if any, that was not at the sponsor's expense. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor.

Exclude: Travel-related expenses provided by federal, state, and local governments, or by a foreign government required to be separately reported under the Foreign Gifts and Decorations Act (5 U.S.C. § 7342), travel paid for by a Federal political committee, travel provided to a spouse or dependent child that is totally independent of his or her relationship to you.

	Source	Date(s)	Point of Departure—Destination—Point of Return	Lodging? (Y/N)	Food? (Y/N)	Was a Family Member Included? (Y/N)	Any time not at sponsor's expense
Examples	Chicago Chamber of Commerce	Mar. 2	Wash., D.C.—Chicago—Wash., D.C.	N	N	N	N
	Roycroft Corporation	Aug. 6–13	Wash., D.C.—Los Angeles—Cleveland	Y	Y	Y	4 Days
	National Meat Association	Feb 14–15	Wash, DC – San Diego – Wash, DC	Y	Y	N	N
	Bipartisan Retreat	March 7–9	Wash, DC – Hershey, PA – Wash, DC	Y	Y	Y	N
	California Cable TV Association	Aug 15	Sacramento, CA – Sacramento, CA	Y	Y	N	N

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SCHEDULE VIII — POSITIONS

Report all positions, compensated or uncompensated, held during the current calendar year as an officer, director, trustee of an organization, partner, proprietor, representative, employee, or consultant of any corporation, firm, partnership, or other business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States

Exclude: Positions held in any religious, social, fraternal, or political entities; positions solely of an honorary nature; and positions listed on Schedule I

Position	Name of Organization
Partner	J-T Investments (No income in 1997)

SCHEDULE IX — AGREEMENTS

Identify the date, parties to, and general terms of any agreement or arrangement with respect to future employment, a leave of absence during the period of government service; continuation or deferral of payments by a former or current employer other than the U S Government; or continuing participation in an employee welfare or benefit plan maintained by a former employer

Date	Parties To	Terms of Agreement

GPO 1998 46-260 (mac)

Use additional sheets if more space is required.

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1997

FORM A
For use by Members, officers, and employees

98 MAY 15 PM 3:07

Michael F. Doyle, Jr.
(Full Name)

2227 Hampton Street
(Mailing Address)

Swissvale, PA

Daytime Telephone: 412-244-9386

HAND DELIVERED

MC (Office Use Only)

9

Filer Status

[X] Member of the U.S. House of Representatives — State PA, District 18

[ ] Officer or Employee — Employing Office

Report Type

[X] Annual (May 15)

[ ] Amendment

[ ] Termination — Termination Date

A *$200 penalty* shall be assessed against anyone who files more than 30 days late.

PRELIMINARY INFORMATION — ANSWER EACH OF THESE QUESTIONS

I Did you or your spouse have "earned" income (e.g., salaries or fees) of $200 or more from any source in the reporting period?
If yes, complete and attach Schedule I. Yes [X] No [ ]

II Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period?
If yes, complete and attach Schedule II. Yes [ ] No [X]

III Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period?
If yes, complete and attach Schedule III. Yes [X] No [ ]

IV Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset worth more than $1,000 in the reporting period?
If yes, complete and attach Schedule IV. Yes [ ] No [X]

V Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period?
If yes, complete and attach Schedule V. Yes [X] No [ ]

VI Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $250 and not otherwise exempt)?
If yes, complete and attach Schedule VI. Yes [ ] No [X]

VII Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $250 from one source)?
If yes, complete and attach Schedule VII. Yes [X] No [ ]

VIII Did you hold any reportable positions on or before the date of filing in the current calendar year?
If yes, complete and attach Schedule VIII. Yes [X] No [ ]

IX Did you have any reportable agreement or arrangement with an outside entity?
If yes, complete and attach Schedule IX Yes [ ] No [X]

Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION — ANSWER EACH OF THESE QUESTIONS

TRUSTS—Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child? Yes [ ] No [X]

EXEMPTION—Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption? Yes [ ] No [X]

CERTIFICATION — THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended. The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct or its designee. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil penalties and criminal sanctions (*See* 5 U.S.C. app. 4, §104 and 18 U.S.C. §1001)

SIGNATURE OF REPORTING INDIVIDUAL [signature] **DATE** (Month/Day/Year) 5/14/98

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Name	Page of
Michael F. Doyle, Jr.	1 8

SCHEDULE I — EARNED INCOME

List the source, type, and amount of earned income from any source (other than the filer's current employment by the U.S. Government) totalling $200 or more during the preceding calendar year. For a spouse, list the source and amount of any honoraria; list only the source for other spouse earned income exceeding $1,000.

	Source	Type	Amount
Examples	Keene State	Approved Teaching Fee	$6,000
	State of Maryland	Legislative Pension	$9,000
	Civil War Roundtable (Oct 2nd)	Spouse Speech	$1,000
	Ontario County Board of Education	Spouse Salary	NA
	Eastgate Insurance Agency	Renewal commissions*	$12,419.53
		*from policies issued prior to coming to Congress.	

For payments to charity in lieu of honoraria, use Schedule II.

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SCHEDULE II — PAYMENTS IN LIEU OF HONORARIA MADE TO CHARITY

List the source, activity (i.e., speech, appearance, or article), date, and amount of any payment made by the sponsor of an event to a charitable organization in lieu of an honorarium. A separate confidential list of charities receiving such payments must be filed directly with the Committee on Standards of Official Conduct. An envelope for transmitting the list is included in each Member's filing package.

Source	Activity	Date	Amount
Examples Association of American Associations, Wash., D.C.	Speech	Feb. 2, 1997	$2,000
XYZ Magazine	Article	Aug. 13, 1997	$500
N/A			

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SCHEDULE III — ASSETS AND "UNEARNED" INCOME

BLOCK A — Asset and/or Income Source

Identify (a) each asset held for investment or production of income with a fair market value exceeding $1,000 at the end of the reporting year, and (b) any other asset or source of income which generated more than $200 in "unearned" income during the year. For rental property or land, provide an address. Provide full names of any mutual funds. For an IRA or retirement plan that is *self-directed*, list the underlying assets worth more than $1,000. For an IRA or retirement plan that is not selfdirected, name the institution holding the account.

Exclude: Your personal residence(s) (unless there is rental income); any debt owed to you by your spouse, or by your or your spouse's child, parent, or sibling; any deposits totalling $5,000 or less in personal savings accounts; any financial interests in or income derived from U.S. Government retirement programs.

If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC) or is jointly held (JT), in the optional column on the far left.

BLOCK B — Value of Asset at close of reporting year. If you use a valuation method other than fair market value, please specify the method used. If an asset was sold and is included only because it generated income, the value should be "None."

BLOCK C — Type of Income

BLOCK D — Amount of Income For IRA's and retirement plans that are *not* self-directed, you may write in "NA" for income.

**NOTE: After expenses, net is zero. I, personally, receive no income from these properties

BLOCK E — Transaction Indicate if asset was purchased (P), sold (S), or exchanged (E) in reporting year

	Block A	Block B: A None	B $1 – $1,000	C $1,001 – $15,000	$15,001 – $50,000	E $50,001 – $100,000	F $100,001 – $250,000	G $250,001 – $500,000	H $500,001 – $1,000,000	I $1,000,001 – $5,000,000	J $5,000,001 – $25,000,000	K $25,000,001 – $50,000,000	L Over $50,000,000	Block C: Dividends	Rent	Interest	Capital Gains	Exempted Trust	Qualified Blind Trust	Other Type of Income (Specify. For Example, Partnership Income or Farm Income)	Block D: I None – Net	II $1 – $200	III $201 – $1,000	IV $1,001 – $2,500 – Gross	V $2,501 – $5,000	VI $5,001 – $15,000 – Gross	VII $15,001 – $50,000	VIII $50,001 – $100,000	IX $100,001 – $1,000,000	X $1,000,001 – $5,000,000	XI Over $5,000,000	Block E: P, S, E
SP, DC, JT	*Examples:*													X																		
SP	Mega Corp Stock					X																										
	Simon & Schuster			Indefinite																Royalties												
JT	1st Bank of Paducah, KY accounts						X									X																
JT	J&M Associates (50% owner of following holdings):																															
	7223 Church St. Pgh, PA				X										X						X			X								
	712 S. Trenton Ave, Pgh, PA				X										X						X					X						
	7643 Highland Ave, Pgh, PA				X										X						X					X						
JT	Monogahela Co. (25% owner of the following holdings):																															
	1916 Monogahela Ave, Pgh, PA				X										X						X					X						

For additional assets and unearned income, use next page.

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SCHEDULE III — ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Name: Michael F. Doyle, Jr. | Page 4 of 8

SP. DC. JT	BLOCK A Asset and/or Income Source	BLOCK B Year-End Value of Asset											BLOCK C Type of Income							BLOCK D Amount of Income										BLOCK E Transaction
		A None	B $1 – $1,000	C $1,001 – $15,000	D $15,001 – $50,000	E $50,001 – $100,000	F $100,001 – $250,000	G $250,001 – $500,000	H $500,001 – $1,000,000	I $1,000,001 – $5,000,000	J $5,000,001 – $25,000,000	K $25,000,001 – $50,000,000	L Over $50,000,000	DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Type of Income (Specify)	I None	II $1 – $200	III $201 – $1,000	IV $1,001 – $2,500	V $2,501 – $5,000	VI $5,001 – $15,000	VII $15,001 – $50,000	VIII $50,001 – $100,000	IX $100,001 – $1,000,000	X $1,000,001 – $5,000,000	XI Over $5,000,000	P, S, E
JT	Eastgate Insurance Agency (45% owned)						X														X									
	S.E.R.S. - Commonwealth of PA						X														X									

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SCHEDULE IV — TRANSACTIONS

Name: Michael F. Doyle, Jr. | Page 5 of 8

Report any purchase, sale, or exchange by you, your spouse, or dependent child during the reporting year of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child, or the purchase or sale of your personal residence, unless it is rented out.

SP, DC, JT	Asset	Type of Transaction: PURCHASE	SALE	EXCHANGE	Date: (MO/DAY/YR)	Amount of Transaction: B $1,001–$15,000	C $15,001–$50,000	D $50,001–$100,000	E $100,001–$250,000	F $250,001–$500,000	G $500,001–$1,000,000	H $1,000,001–$5,000,000	I $5,000,001–$25,000,000	J $25,000,001–$50,000,000	K Over $50,000,000
SP	*Example:* Mega Corporation Common Stock	X			10–12–97		X								
	N/A														

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SCHEDULE V — LIABILITIES

Report liabilities of over $10,000 owed to any one creditor ***at any time*** during the reporting period by you, your spouse, or dependent child. Mark the highest amount owed during the year. **Exclude:** Any mortgage on your personal residence (unless it is rented out); loans secured by automobiles, household furniture, or appliances, and liabilities owed to a spouse, or the child, parent, or sibling of you or your spouse. Report ***revolving charge accounts*** only if the balance at the end of the reporting period exceeded $10,000.

SP, DC, JT	Creditor	Type of Liability	Amount of Liability									
			B $10,001 – $15,000	C $15,001 – $50,000	D $50,001 – $100,000	E $100,001 – $250,000	F $250,001 – $500,000	G $500,001 – $1,000,000	H $1,000,001 – $5,000,000	I $5,000,001 – $25,000,000	J $25,000,001 – $50,000,000	K Over $50,000,000
Example	First Bank of Wilmington, Delaware	Mortgage on 123 Main St., Dover, Del				X						
JT	S&T Bank of Pittsburgh, Pgh, PA	Mortgage on properties ~~held by J&M Assoc (50%~~ owner)			X							
JT	PNC Corp, Pgh, PA	Mortgage on properties held ~~by Monogahela Co (25%~~ owner_		X								
JT	PA State Employees Credit Union	Visa	X									

SCHEDULE VI — GIFTS

Report the source, a brief description, and the value of all gifts totalling more than $250 received by you, your spouse, or a dependent child from any source during the year

Exclude: Gifts from relatives, gifts of personal hospitality of an individual, local meals, and gifts to a spouse or dependent child that are totally independent of his or her relationship to you. Gifts with a value of $100 or less need not be added towards the $250 disclosure threshold

Note: The gift rule (House Rule 51) prohibits gifts except as specifically provided in the rule.

Source	Description	Value
Example Mr. Joseph H. Smith, Anytown, Anystate	Silver Platter (determination on personal friendship received from Committee on Standards)	$270
NONE		

Use additional sheets if more space is required.

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SCHEDULE VII —TRAVEL PAYMENTS AND REIMBURSEMENTS

Identify the source and list travel itinerary, dates, and nature of expenses provided for travel and travel-related expenses totalling more than $250 received by you, your spouse, or a dependent child during the reporting period. Indicate whether a family member accompanied the traveler at the sponsor's expense, and the amount of time, if any, that was not at the sponsor's expense. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor.

Exclude: Travel-related expenses provided by federal, state, and local governments, or by a foreign government required to be separately reported under the Foreign Gifts and Decorations Act (5 U.S.C. § 7342); travel paid for by a Federal political committee; travel provided to a spouse or dependent child that is totally independent of his or her relationship to you.

	Source	Date(s)	Point of Departure—Destination—Point of Return	Lodging? (Y/N)	Food? (Y/N)	Was a Family Member Included? (Y/N)	Any time not at sponsor's expense
Examples	Chicago Chamber of Commerce	Mar. 2	Wash., D.C.—Chicago—Wash., D.C.	N	N	N	N
	Roycroft Corporation	Aug. 6–13	Wash., D.C.—Los Angeles—Cleveland	Y	Y	Y	4 Days
	Oregon Prayer Breakfast	Apr 24-25	Wash DC-Portland-Wash DC	Y	Y	N	N
	Bi-Partisan Retreat	March 7-9	Wash DC-Hershey, PA-Wash DC	Y	Y	Y	N

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SCHEDULE VIII — POSITIONS

Report all positions, compensated or uncompensated, held during the current calendar year as an officer, director, trustee of an organization, partner, proprietor, representative, employee, or consultant of any corporation, firm, partnership, or other business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States

Exclude: Positions held in any religious, social, fraternal, or political entities, positions solely of an honorary nature; and positions listed on Schedule I

Position	Name of Organization
Secretary/Treasurer	Eastgate Insurance Agency, Inc.
Partner	J & M Associates
Partner	Monogahela Company

SCHEDULE IX — AGREEMENTS

Identify the date, parties to, and general terms of any agreement or arrangement with respect to future employment; a leave of absence during the period of government service, continuation or deferral of payments by a former or current employer other than the U.S. Government; or continuing participation in an employee welfare or benefit plan maintained by a former employer.

Date	Parties To	Terms of Agreement
	NONE	

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Use additional sheets if more space is required.

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UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1997

FORM A
For use by Members, officers and employees

11

DAVID T. DREIER
(Full Name)

Room 237, Cannon House Office Building
(Mailing Address)

Washington, DC 20515

Daytime Telephone
(202) 225-2305

MC
(Office Use Only)

Filer Status
- [X] Member of the U.S. House of Representatives — State CA, District 28
- [ ] Officer or Employee — Employing Office

Report Type
- [X] Annual (May 15)
- [ ] Amendment
- [ ] Termination — Termination Date

A *$200 penalty* shall be assessed against anyone who files more than 30 days late.

PRELIMINARY INFORMATION — ANSWER EACH OF THESE QUESTIONS

I. Did you or your spouse have "earned" income (e.g., salaries or fees) of $200 or more from any source in the reporting period? **If yes, complete and attach Schedule I.** — Yes [X] No [ ]

II. Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance or article in the reporting period? **If yes, complete and attach Schedule II.** — Yes [X] No [ ]

III. Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? **If yes, complete and attach Schedule III.** — Yes [X] No [ ]

IV. Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset worth more than $1,000 in the reporting period? **If yes, complete and attach Schedule IV.** — Yes [X] No [ ]

V. Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? **If yes, complete and attach Schedule V.** — Yes [X] No [ ]

VI. Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $250 and not otherwise exempt)? **If yes, complete and attach Schedule VI.** — Yes [ ] No [X]

VII. Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $250 from one source)? **If yes, complete and attach Schedule VII.** — Yes [X] No [ ]

VIII. Did you hold any reportable positions on or before the date of filing in the current calendar year? **If yes, complete and attach Schedule VIII.** — Yes [X] No [ ]

IX. Did you have any reportable agreement or arrangement with an outside entity? **If yes, complete and attach Schedule IX.** — Yes [ ] No [X]

Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION — ANSWER EACH OF THESE QUESTIONS

TRUSTS—Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child? — Yes [ ] No [X]

EXEMPTION—Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption? — Yes [ ] No [X]

CERTIFICATION — THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended. The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct or its designee. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil penalties and criminal sanctions (*See* 5 U.S.C. app. 4, §104 and 18 U.S.C. §1001).

SIGNATURE OF REPORTING INDIVIDUAL: David T. Dreier

DATE (Month/Day/Year): MAY 14, 1998

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SCHEDULE I — EARNED INCOME

List the source, type, and amount of earned income from any source (other than the filer's current employment by the U.S. Government) totalling $200 or more during the preceding calendar year. For a spouse, list the source and amount of any honoraria; list only the source for other spouse earned income exceeding $1,000.

Source	Type	Amount
Examples Keene State	Approved Teaching Fee	$6,000
State of Maryland	Legislative Pension	$9,000
Civil War Roundtable (Oct. 2nd)	Spouse Speech	$1,000
Ontario County Board of Education	Spouse Salary	NA
H. E. Dreier, Jr., Inc.	Approved fee	$4,000

For payments to charity in lieu of honoraria, use Schedule II.

SCHEDULE II — PAYMENTS IN LIEU OF HONORARIA MADE TO CHARITY

List the source, activity (i.e., speech, appearance, or article), date, and amount of any payment made by the sponsor of an event to a charitable organization in lieu of an honorarium. A separate confidential list of charities receiving such payments must be filed directly with the Committee on Standards of Official Conduct. An envelope for transmitting the list is included in each Member's filing package.

Source	Activity	Date	Amount
Examples Association of American Associations, Wash., D.C.	Speech	Feb. 2, 1997	$2,000
XYZ Magazine	Article	Aug. 13, 1997	$500
Fireman's Fund	Speech	Feb. 25, 1997	$ 500
The Washington Campus, Inc.	Speech	July 15, 1997	500
National Retail Federation	Speech	Oct. 1, 1997	1,000

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Name DAVID T. DREIER | Page 4 of 11

SCHEDULE III — ASSETS AND "UNEARNED" INCOME

BLOCK A — Asset and/or Income Source

Identify (a) each asset held for investment or production of income with a fair market value exceeding $1,000 at the end of the reporting year, and (b) any other asset or source of income which generated more than $200 in "unearned" income during the year. For rental property or land, provide an address. Provide full names of any mutual funds. For an IRA or retirement plan that is *self-directed*, list the underlying assets worth more than $1,000. For an IRA or retirement plan that is not selfdirected, name the institution holding the account.

Exclude: Your personal residence(s) (unless there is rental income); any debt owed to you by your spouse, or by your or your spouse's child, parent, or sibling; any deposits totalling $5,000 or less in personal savings accounts; any financial interests in or income derived from U.S. Government retirement programs.

If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC) or is jointly held (JT), in the optional column on the far left

SP		SP	Mega Corp Stock
DC	*Examples*		Simon & Schuster
JT			1st Bank of Paducah, KY accounts

BLOCK B — Value of Asset

at close of reporting year.
If you use a valuation method other than fair market value, please specify the method used.
If an asset was sold and is included only because it generated income, the value should be "None."

	A None	B $1 – $1,000	C $1,001 – $15,000	$15,001 – $50,000	E $50,001 – $100,000	F $100,001 – $250,000	G $250,001 – $500,000	H $500,001 – $1,000,000	I $1,000,001 – $5,000,000	J $5,000,001 – $25,000,000	K $25,000,001 – $50,000,000	L Over $50,000,000
Examples		Indefinite			X							
Roseville Commun.-stock					X							
IBM - Stock						X						
Interest earning checking Cong. Fed. Credit Union			X									
Money Market account Cong. Fed. Credit Union				X								
Oklahoma Publishing Co.-- Stock							X					
Gaylord Entertainment Co.- Stock							X					

BLOCK C — Type of Income

	DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Type of Income (Specify For Example Partnership Income or Farm Income)
Examples							Royalties
Roseville Commun.-stock	X						
IBM - Stock	X						
Interest earning checking Cong. Fed. Credit Union			X				
Money Market account Cong. Fed. Credit Union			X				
Oklahoma Publishing Co.-- Stock	X						
Gaylord Entertainment Co.- Stock	X						

BLOCK D — Amount of Income

For IRA's and retirement plans that are *not* self-directed, you may write in "NA" for income.

	I None	II $1 – $200	III $201 – $1,000	IV $1,001 – $2,500	V $2,501 – $5,000	VI $5,001 – $15,000	VII $15,001 – $50,000	VIII $50,001 – $100,000	IX $100,001 – $1,000,000	X $1,000,001 – $5,000,000	XI Over $5,000,000
Examples				X					X		
Roseville Commun.-stock				X							
IBM - Stock			X								
Interest earning checking Cong. Fed. Credit Union			X								
Money Market account Cong. Fed. Credit Union			X								
Oklahoma Publishing Co.-- Stock					X						
Gaylord Entertainment Co.- Stock						X					

BLOCK E — Transaction

Indicate if asset was purchased (P), sold (S), or exchanged (E) in reporting year.

Examples	P, S, or P
Roseville Commun.-stock	
IBM - Stock	
Interest earning checking Cong. Fed. Credit Union	
Money Market account Cong. Fed. Credit Union	
Oklahoma Publishing Co.-- Stock	
Gaylord Entertainment Co.- Stock	

For additional assets and unearned income, use next page.

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SCHEDULE III — ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Name DAVID T. DREIER | Page 5 of 11

SP. DC. JT	BLOCK A Asset and/or Income Source	BLOCK B Year-End Value of Asset											BLOCK C Type of Income							BLOCK D Amount of Income										BLOCK E Transaction
		A None	B $1 – $1,000	C $1,001 – $15,000	D $15,001 – $50,000	E $50,001 – $100,000	F $100,001 – $250,000	G $250,001 – $500,000	H $500,001 – $1,000,000	I $1,000,001 – $5,000,000	J $5,000,001 – $25,000,000	K $25,000,001 – $50,000,000	L Over $50,000,000	DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Type of Income (Specify)	I None	II $1 – $200	III $201 – $1,000	IV $1,001 – $2,500	V $2,501 – $5,000	VI $5,001 – $15,000	VII $15,001 – $50,000	VIII $50,001 – $100,000	IX $100,001 – $1,000,000	X $1,000,001 – $5,000,000	XI Over $5,000,000	P, S, E
	IRA Plan -Calvert Group	X												X								X									E
	Pension Plan-1st Union	X												X								X									E
	1st Union Bank-Money Mkt. (closed 1997)	X												X								X									
	Alliance Fund Services	X												X								X									E
	Fleet Clearing Corp.	X												X								X									E
	Muni.Invest.Trust SR 13 CA	X												X								X									S
	MerrillLynch CMA (closed 1997)	X												X									X								
	Borden Chemical/Plastics	X												X		X							X								S
	Falcon Drilling-Stock				X									X							X										P
	Property-5 Stratford, RM,CA							X							X									X							
	Mass.Mutual Life Ins.					X										X						X									
	Lancaster Capital Corp. Ltd. Partnership					X								X	X	X							X								
	Tiffany Manor Ltd. Ptshp.									X					X	X													X		
	Ericsson L.M. Telephone						X							X									X								
	Freeport-McMoran Ltd.				X									X								X									
	Pacific Telesis Financing	X												X			X						X								S
	Great Northern Iron Ore	X															X							X							S
	CBS Corporation--Stock								X					X									X								E
	Caterpillar--Stock				X									X							X										P
	Compaq--Stock				X									X							X										P

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SCHEDULE III — ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Name	DAVID T. DREIER	Page 6 of 11

SP. DC. JT	BLOCK A Asset and/or Income Source	BLOCK B Year-End Value of Asset												BLOCK C Type of Income							BLOCK D Amount of Income										BLOCK E Transaction
		A None	B $1 – $1,000	C $1,001 – $15,000	D $15,001 – $50,000	E $50,001 – $100,000	F $100,001 – $250,000	G $250,001 – $500,000	H $500,001 – $1,000,000	I $1,000,001 – $5,000,000	J $5,000,001 – $25,000,000	K $25,000,001 – $50,000,000	L Over $50,000,000	DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Type of Income (Specify)	I None	II $1 – $200	III $201 – $1,000	IV $1,001 – $2,500	V $2,501 – $5,000	VI $5,001 – $15,000	VII $15,001 – $50,000	VIII $50,001 – $100,000	IX $100,001 – $1,000,000	X $1,000,001 – $5,000,000	XI Over $5,000,000	
	Templeton R.F.--Stock				X									X							X										P
	Olde Money Market Acct.						X							X								X									P
	Olde IRA Account				X									X								X									P
	Novell Inc.--Stock			X										X								X									P
	Seligman Comm.--Stock			X										X								X									P
	John Hancock Mutual Fund						X							X									X								P
	Venture Stores	X												X									X								P,S
	Singer Co. NV			X										X								X									P

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SCHEDULE IV — TRANSACTIONS

Name DAVID T. DREIER | Page 7 of 11

Report any purchase, sale, or exchange by you, your spouse, or dependent child during the reporting year of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child, or the purchase or sale of your personal residence, unless it is rented out.

SP, DC, JT	Asset	Type of Transaction: PURCHASE	SALE	EXCHANGE	Date (MO/DAY/YR)	Amount of Transaction: B ($1,001–$15,000)	C ($15,001–$50,000)	D ($50,001–$100,000)	E ($100,001–$250,000)	F ($250,001–$500,000)	G ($500,001–$1,000,000)	H ($1,000,001–$5,000,000)	I ($5,000,001–$25,000,000)	J ($25,000,001–$50,000,000)	K (Over $50,000,000)
SP	*Example* Mega Corporation Common Stock	X			10-12-97		X								
	IRA Plan-Calvert Group			X	8/12/97		X								
	Pension Plan-1st Union			X	11/21/97		X								
	Muni Investment Trust SR 13 CA		X		1/27/97	X									
	Borden Chemical & Plastics -- Stock		X		7/7/97		X								
	Falcon Drilling -- Stock	X			7/7/97		X								
	Pacific Telesis Financing--Stock		X		12/16/97		X								
	Great Northern Iron Ore--Stock		X		1/24/97		X								
	CBS Corporation--Stock (Gaylord Ent. to Westinghouse to CBS)			X	12/9/97 12/17/97						X				
	Caterpillar--Stock	X			12/11/97		X								
	Compaq--Stock	X			12/16/97		X								
	Templeton R.F.--Stock	X			7/14/97		X								
	Olde IRA Account (Calvert and 1st Union Accts. exchanged for Olde IRA)			X	8/19/97		X								
	Novell Inc.--Stock	X			8/22/97	X									
	Seligman Comm.--Stock	X			12/8/97	X									
	Olde Money Market Account	X			12/31/97				X						
	John Hancock Funds	X			6/16/97				X						

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SCHEDULE IV — TRANSACTIONS

Name DAVID T. DREIER | Page 8 of 11

Report any purchase, sale, or exchange by you, your spouse, or dependent child during the reporting year of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child, or the purchase or sale of your personal residence, unless it is rented out.

SP, DC, JT	Asset	Type of Transaction: PURCHASE	SALE	EXCHANGE	Date (MO/DAY/YR)	Amount of Transaction: B ($1,001–$15,000)	C ($15,001–$50,000)	D ($50,001–$100,000)	E ($100,001–$250,000)	F ($250,001–$500,000)	G ($500,001–$1,000,000)	H ($1,000,001–$5,000,000)	I ($5,000,001–$25,000,000)	J ($25,000,001–$50,000,000)	K (Over $50,000,000)
SP	*Example* Mega Corporation Common Stock	X			10-12-97		X								
	Venture Stores	X			1/24/97	X									
			X		12/16/97										

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SCHEDULE V — LIABILITIES

Report liabilities of over $10,000 owed to any one creditor ***at any time*** during the reporting period by you, your spouse, or dependent child. Mark the highest amount owed during the year. **Exclude:** Any mortgage on your personal residence (unless it is rented out), loans secured by automobiles, household furniture, or appliances, and liabilities owed to a spouse, or the child, parent, or sibling of you or your spouse. Report ***revolving charge accounts*** only if the balance at the end of the reporting period exceeded $10,000.

SP, DC, JT	Creditor	Type of Liability	Amount of Liability									
			B $10,001 – $15,000	C $15,001 – $50,000	D $50,001 – $100,000	E $100,001 – $250,000	F $250,001 – $500,000	G $500,001 – $1,000,000	H $1,000,001 – $5,000,000	I $5,000,001 – $25,000,000	J $25,000,001 – $50,000,000	K Over $50,000,000
Example	First Bank of Wilmington, Delaware	Mortgage on 123 Main St., Dover, Del.				X						
	None											

SCHEDULE VI — GIFTS

Report the source, a brief description, and the value of all gifts totalling more than $250 received by you, your spouse, or a dependent child from any source during the year.

Exclude: Gifts from relatives, gifts of personal hospitality of an individual, local meals, and gifts to a spouse or dependent child that are totally independent of his or her relationship to you. Gifts with a value of $100 or less need not be added towards the $250 disclosure threshold.

Note: The gift rule (House Rule 51) prohibits gifts except as specifically provided in the rule.

Source	Description	Value
Example Mr. Joseph H. Smith, Anytown, Anystate	Silver Platter (determination on personal friendship received from Committee on Standards)	$270
None		

Use additional sheets if more space is required.

SCHEDULE VII —TRAVEL PAYMENTS AND REIMBURSEMENTS

Identify the source and list travel itinerary, dates, and nature of expenses provided for travel and travel-related expenses totalling more than $250 received by you, your spouse, or a dependent child during the reporting period. Indicate whether a family member accompanied the traveler at the sponsor's expense, and the amount of time, if any, that was not at the sponsor's expense. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor.

Exclude: Travel-related expenses provided by federal, state, and local governments, or by a foreign government required to be separately reported under the Foreign Gifts and Decorations Act (5 U.S.C. § 7342); travel paid for by a Federal political committee; travel provided to a spouse or dependent child that is totally independent of his or her relationship to you.

Source	Date(s)	Point of Departure—Destination—Point of Return	Lodging? (Y/N)	Food? (Y/N)	Was a Family Member Included? (Y/N)	Any time not at sponsor's expense
Examples						
Chicago Chamber of Commerce	Mar 2	Wash., D.C.—Chicago—Wash., D.C.	N	N	N	N
Roycroft Corporation	Aug. 6–13	Wash., D.C.—Los Angeles—Cleveland	Y	Y	Y	4 Days
Bohemian Grove	7/18/97 7/20/97	Washington, DC--San Francisco--Washington, DC	Y	Y	N	(No transportation)
Hong Kong	6/28/97- 7/4/97	Los Angeles, CA--Hong Kong--Los Angeles, CA	Y	Y	N	
Duke University	9/13/97	Washington, DC--Raleigh, Durham, NC--Washington, DC	N	N	N	

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SCHEDULE VIII — POSITIONS

Report all positions, compensated or uncompensated, held during the current calendar year as an officer, director, trustee of an organization, partner, proprietor, representative, employee, or consultant of any corporation, firm, partnership, or other business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States.

Exclude: Positions held in any religious, social, fraternal, or political entities; positions solely of an honorary nature; and positions listed on Schedule I.

Position	Name of Organization
Vice President	Dreier Development Co., Kansas City, Missouri (1/1/97-7/31/97)
Secretary	The Dreier Family Foundation
Board of Trustees	Claremont-McKenna College, Claremont, California
Board Member	International Republican Institute
CO-Chairman of the Board	Los Angeles Committee for the Homeless (Los Angeles Mission)

SCHEDULE IX — AGREEMENTS

Identify the date, parties to, and general terms of any agreement or arrangement with respect to: future employment; a leave of absence during the period of government service; continuation or deferral of payments by a former or current employer other than the U.S. Government; or continuing participation in an employee welfare or benefit plan maintained by a former employer.

Date	Parties To	Terms of Agreement
	None	

GPO 1998 46-260 (mac)

Use additional sheets if more space is required.

DAVID DREIER
CALIFORNIA

COMMITTEE ON
RULES

RECEIVED
98 JUN 11 AM 10:08

HAND DELIVERED

237 CANNON BUILDING
WASHINGTON, DC 20515
(202) 225-2305

112 NORTH SECOND AVENUE
COVINA, CA 91723
(626) 339-9078
(909) 592-2857

Congress of the United States
House of Representatives
Washington, DC 20515

June 11, 1998

(2)

The Honorable Robin H. Carle
Clerk
U.S. House of Representatives
B-106 Cannon House Office Building
Legislative Resource Center
Washington, D.C. 20515

✓
MC

Dear Ms. Carle:

Please consider this letter an amendment to my Financial Disclosure Statement for Calendar Year 1997.

I inadvertently omitted Singer Co. NV from Schedule IV - Transactions. I am enclosing an amended page of Schedule IV (page 8 of the Financial Disclosure Statement), reflecting this transaction.

Thank you for your assistance with this matter.

Sincerely,

David Dreier

DD:jm
Enclosure

THIS STATIONERY PRINTED ON PAPER MADE OF RECYCLED FIBERS

SCHEDULE IV — TRANSACTIONS

Name DAVID T. DREIER

Report any purchase, sale, or exchange by you, your spouse, or dependent child during the reporting year of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child, or the purchase or sale of your personal residence, unless it is rented out.

SP, DC, JT	Asset	Type of Transaction: PURCHASE	SALE	EXCHANGE	Date (MO/DAY/YR)	Amount of Transaction: B $1,001–$15,000	C $15,001–$50,000	D $50,001–$100,000	E $100,001–$250,000	F $250,001–$500,000	G $500,001–$1,000,000	H $1,000,001–$5,000,000	I $5,000,001–$25,000,000	J $25,000,001–$50,000,000	K Over $50,000,000
SP	*Example:* Mega Corporation Common Stock	X			10-12-97		X								
	Venture Stores	X			1/24/97	X									
			X		12/16/97										
	Singer Co. NV	X			1/24/97	X									

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RECEIVED
98 MAY 15 AM 11:29

UNITED STATES HOUSE OF REPRESENTATIVES FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1997	Form A For use by Members, officers, and employees

John J. Duncan, Jr.
(Full Name)

12227 Brighton Court
(Mailing Address)

Knoxville TN 37922

Daytime Telephone: 202-225-5435

HAND DELIVERED (Office Use Only)

Filer Status	[X]	Member of the U.S. House of Representatives	State: TN District 02	[ ]	Officer or Employee	Employing Office:
Report Type	[X]	Annual (May 15)	[ ] Amendment	[ ]	Termination	Termination Date:

A $200 penalty shall be assessed against anyone who files more than 30 days late.

PRELIMINARY INFORMATION -- ANSWER EACH OF THESE QUESTIONS

I. Did you or your spouse have "earned" income (e.g., salaries or fees) of $200 or more from any source in the reporting period? **If yes, complete and attach Schedule I.**	Yes [X]	No [ ]	VI. Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $250 and not otherwise exempt)? **If yes, complete and attach Schedule VI.**	Yes [ ]	No [X]
II. Did any individual or organization make a donation to charity in lieu of paying you for a speech, apppearance, or article in the reporting period? **If yes, complete and attach Schedule II.**	Yes [ ]	No [X]	VII. Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $250 from one source)? **If yes, complete and attach Schedule VII.**	Yes [X]	No [ ]
III. Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? **If yes, complete and attach Schedule III.**	Yes [X]	No [ ]	VIII. Did you hold any reportable positions on or before the date of filing in the current calendar year? **If yes, complete and attach Schedule VIII.**	Yes [ ]	No [X]
IV. Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset worth more than $1,000 in the reporting period? **If yes, complete and attach Schedule IV.**	Yes [X]	No [ ]	IX. Did you have any reportable agreement or arrangement with an outside entity? **If yes, complete and attach Schedule IX.**	Yes [ ]	No [X]
V. Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? **If yes, complete and attach Schedule V.**	Yes [ ]	No [X]	**Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.**		

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION -- ANSWER EACH OF THESE QUESTIONS

TRUSTS - Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child? (See Instructions, pages 10-11.)	Yes [ ]	No [X]
EXEMPTION - Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption? (See Instructions, page 11.)	Yes [X]	No [ ]

CERTIFICATION -- THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended. The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct or its designee. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil penalties and criminal sanctions (See 5 U.S.C. app. 4, 104 and 18 U.S.C. 1001)

SIGNATURE OF REPORTING INDIVIDUAL



DATE (Month/Day/Year) 5/14/98

1041

Name John J. Duncan, Jr.	Page ___ of __

SCHEDULE I -- EARNED INCOME

List the source, type, and amount of earned income from any source (other than the filer's current employment by the U.S. Government) totalling $200 or more during the preceding calendar year. For a spouse, list the source and amount of any honoraria, list only the source for other spouse earned income exceeding $1,000. For further information, see Instructions, pages 12-13.

	Source	Type	Amount
Examples	Keene State	Approved Teaching Fee	$10,000
	State of Maryland	Legislative Pension	$9,000
	Civil War Roundtable (Oct. 2nd)	Spouse Speech	$1,000
	Ontario County Board of Education	Spouse Salary	NA
	Boys and Girls Clubs of Greater Knoxville, Inc.	spouse salary	NA

For payments to charity in lieu of honoraria, use Schedule II.

Name	Page ___ of __

SCHEDULE II -- PAYMENTS IN LIEU OF HONORARIA MADE TO CHARITY

List the source, activity (i.e., speech, appearance, or article), date, and amount of any payment made by the sponsor of an event to a charitable organization in lieu of an honorarium. A separate confidential list of charities receiving such payments must be filed directly with the Committe on Standards of Official Conduct. An envelope for transmitting the list is included in each Member's filing package. For further information, see Instructions, pages 13-14.

Source		Activity	Date	Amount
Examples:	Association of American Associations, Wash., D.C.	Speech	Feb. 2, 1994	$2,000
	XYZ Magazine	Article	Aug. 13, 1994	$500

SCHEDULE III -- ASSETS AND "UNEARNED" INCOME

BLOCK A **Asset and/or Income Source** Identify (a) each asset held for investment or production of income with a fair market value exceeding $1,000 at the end of the reporting year, and (b) any other asset or source of income which generated more than $200 in "unearned" income during the year. For rental property or land, provide an address. Provide full names of any mutual funds. For an IRA or retirement plan that is *self-directed*, list the underlying assets worth more than $1,000. For an IRA or retirement plan that is *not* self-directed, name the institution holding the account. **Exclude:** Your personal residence(s) (unless there is rental income); any debt owed to you by your spouse, or by your or your spouse's child, parent, or sibling; any deposits totalling $5,000 or less in personal savings accounts; any financial interests in or income derived from U.S. Government retirement programs. If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC) or is jointly held (JT), in the optional column on the far left. For further information, see Instructions, pages 14-20		BLOCK B **Value of Asset** at close of reporting year If you use a valuation method other than fair market value, please specify the method used. If an asset was sold and is included only because it generated income, the value should be "None."	BLOCK C **Type of Income** If other than one of the listed categories, specify the type of income by writing a bnef description in this block	BLOCK D **Amount of Income** For IRA's and retirement plans that are *not* self-directed, you may write in "NA" for income	BLOCK E **Transaction** Indicate if asset was purchased(P), sold(S), or exchanged(E) in reporting year
SP, DC, *Examples*: JT	SP Mega Corp Stock 123 Main St., Dover, Del 1st Bank of Paducah, KY accounts	$15,001 - $50,000 $250,001 - $500,000 $50,001 - $100,000	Dividends Rent Interest	$201 - $1,000 $1,001 - $2,500 $5,001 - $15,000	P
	Cracker Barrel (stock)	None	Capital Gains and Dividends	$15,001 - $50,000	S
DC	Cracker Barrel (stock)	$1,001 - $15,000	Dividends	$1 - $200	
	IRA-Short Term US Govt TR-P	$1,001 - $15,000	Dividends	$201 - $1,000	
	IRA-Fidelity Low Priced Stocks	$1,001 - $15,000	Dividends	$1 - $200	P
	IRA-TVA	None	Interest	$1,001 - $2,500	S
	IRA-Fidelity Equity Income	None	Dividends	$1 - $200	S
	IRA-Fidelity Fund #0003	$1,001 - $15,000	Dividends	$1 - $200	P

SCHEDULE III -- ASSETS AND "UNEARNED" INCOME

	IRA-Fidelity Growth and Income	None	Dividends	None	S
	IRA-Fidelity Value Fund	None	Dividends	$201 - $1,000	S
	IRA-Federal Home Loan Bank	None	Interest	$1 - $200	S
	IRA-Fidelity Real Estate Investment Portfolio	None	Dividends	$1 - $200	Purchased and Sold
	IRA-Money Market	None	Interest	$1,001 - $2,500	Purchased and Sold
	IRA-Smoky Mtn Bancorp	$50,001 - $100,000	Dividends	None	P
	First Central Bank Stock	$1,001 - $15,000	Dividends	None	
	Equipment Leasing	None	Interest	$201 - $1,000	Chapter 11 filed
	State of TN - pension	$1,001 - $15,000	Interest	$1 - $200	
	Bob Evans - stock	None	Dividends	$1 - $200	S
DC	McDonald's Corp	$1,001 - $15,000	Dividends	$1 - $200	
	Congressional Credit Union-CD	$1,001 - $15,000	Interest	$201 - $1,000	
DC	Chevy Chase - CD	$1,001 - $15,000	Interest	$201 - $1,000	
	Congressional Credit Union-ckg	$1,001 - $15,000	Interest	$1 - $200	
	Bank First-CD	$50,001 - $100,000	Interest	$2,501 - $5,000	
	Independence Federal	$15,001 - $50,000	Interest	None	P
	IRA-Fidelity Short Term Bond	None	Interest	None	S
	IRA-Fidelity Value Fund #39	$1,001 - $15,000	Dividends	$201 - $1,000	P

Name John J. Duncan, Jr.	Page ____ of ___

SCHEDULE IV -- TRANSACTIONS

Report any purchase, sale, or exchange by you, your spouse, or dependent child during the reporting year of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child, or the purchase or sale of your personal residence, unless it is rented out. For further information, see Instructions, pages 20-21.

SP,DC,JT	Asset	Type of Transaction	Date	Amount of Transaction
	Example Mega Corporation Common Stock	Purchase	10/12/94	$15,001 - $50,000
	IRA-Fidelity Growth & Income	Sold	1/23/97	$1,001 - $15,000
	IRA-Fidelity Real Esate Investment Portfolio	Purchase	1/27/97	$1,001 - $15,000
	IRA-Fidelity Real Estate Investment Portfolio	Sold	4/29/97	$1,001 - $15,000
	IRA-Fidelity Equity Income II	Sold	4/29/97	$1,001 - $15,000
	IRA-Federal Home Loan Bank	Sold	4/29/97	$15,001 - $50,000
	IRA-Fidelity Short Term Bond	Sold	4/29/97	$15,001 - $50,000
	IRA-Money Market	Purchase	5/1/97	$50,001 - $100,000
	IRA-Money Market	Sold	5/7/97	$50,001 - $100,000
	IRA-Smoky Mtn. Bancorp	Purchase	5/8/97	$15,001 - $50,000
	IRA-TVA Bond	Sold	9/15/97	$1,001 - $15,000
	IRA-Fidelity Low Priced Stock	Purchase	9/16/97	$1,001 - $15,000
	IRA-Fidelity Fund #0003	Purchase	12/16/97	$1,001 - $15,000
	Cracker Barrel	Sold	5/7/97	$15,001 - $50,000
	Bob Evans	Sold	7/8/97	$1,001 - $15,000
	Independence Federal CD	Purchase	7/18/97	$15,001 - $50,000
	IRA Fidelity Value Fund	Sold	4/29/97	$1,001 - $15,000
	IRA-Fidelity Value Fund #39	Purchase	9/16/97	$1,001 - $15,000

Name John J. Duncan, Jr	Page __ of __

SCHEDULE V -- LIABILITIES

Report liabilities of over $10,000 owed to any one creditor ***at any time*** during the reporting period by you, your spouse, or dependent child. Mark the highest amount owed during the year.
Exclude: Any mortgage on your personal residence (unless it is rented out), loans secured by automobiles, household furniture, or appliances, and liabilities owed to a spouse, or the child, parent, or sibling of you or your spouse. Report ***revolving charge accounts*** only if the balance at the end of the reporting period exceeded $10,000. For further information, see Instructions, pages 21-22.

SP,DC,JT	Creditor	Type of Liability	Amount of Liability
	Example First Bank of Wilmington, Delaware	Mortgage on 123 Main St., Dover, Del.	$100,001 - $250,000

Name	Page ___ of ___

SCHEDULE VI -- GIFTS

Report the source, a bnef description, and the value of all gifts totalling more than $250 received by you, your spouse, or a dependent child from any source during the year.

Exclude: Gifts from relatives, gifts of personal hospitality of an individual, local meals, and gifts to a spouse or dependent child that are totally independent of his or her relationship to you. Gifts with a value of $100 or less need not be added towards the $250 disclosure threshold.

Note: The gift rule (House Rule 52 in the 104th Congress, renumbered as House Rule 51 of the 105th Congress) prohibits gifts except as specifically provided in the rule.

For further information, see Instructions, pages 22-24

Source	Description	Value
Example: Mr. Joseph H. Smith, Anytown, Anystate	Silver Platter (waiver received from Committee on Standards)	$270

Name John J. Duncan, Jr.	Page ____ of ____

SCHEDULE VII -- TRAVEL PAYMENTS AND REIMBURSEMENTS

Identify the source and list travel itinerary, dates, and nature of expenses provided for travel and travel-related expenses totalling more than $250 received by you, your spouse, or a dependent child during the reporting period. Indicate whether a family member accompanied the traveler at the sponsor's expense, and the amount of time, if any, that was not at the sponsor's expense. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor.
Exclude: Travel-related expenses provided by federal, state and local governments, or by a foreign government required to be separately reported under the Foreign Gifts and Decorations Act (5 U.S.C. 7342); travel paid for by a Federal political committee; travel provided to a spouse or dependent child that is totally independent of his or her relationship to you. For further information, see Instructions, pages 24-26.

Source	Date(s)	Point of Departure–Destination–Point of Return	Lodging? (Y/N)	Food? (Y/N)	Was a Family Member Included? (Y/N)	Any time not at sponsor's expense
Examples: Chicago Chamber of Commerce	Mar 2	Wash , D C -Chicago-Wash , D.C	N	N	N	N
Mega Corporation	Aug 6-13	Wash., D.C -Los Angeles-Cleveland	Y	Y	Y	4 Days
National Security Caucus Foundation	1/9-1/15	Knoxville, TN-Belgrade, Serbia, Podgorica, Montenegro, Zagred, Vukovar, Croatia-Knoxville, TN	Y	Y	N	N
National Air Transportation Assn.	3/24-3/27	Knoxville, TN-Ft. Lauderdale, FL-Knoxville	Y	N	Y	N
Klamath Alliance for Resources & Environment	5/2-5/4	Knoxville, McCloud, CA-Knoxville	Y	Y	Y	N

Name	Page ____ of ___

SCHEDULE VIII -- POSITIONS

Report all positions, compensated or uncompensated, held during the current calendar year as an officer, director, trustee of an organization, partner, proprietor, representative, employee, or consultant of any corporation, firm, partnership, or other business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States. For further information, see Instructions, page 26.

Exclude: Positions held in any religious, social, fraternal, or political entities; positions solely of an honorary nature, and positions listed on Schedule I.

Position	Organization

Name	Page ___ of ___

SCHEDULE IX -- AGREEMENTS

Identify the date, parties to, and general terms of any agreement or arrangement with respect to: future employment, a leave of absence during the period of government service, continuation or deferral of payments by a former or current employer other than the U.S. Government, or continuing participation in an employee welfare or benefit plan maintained by a former employer. For further information, see Instructions, pages 26-27.

Date	Parties To	Terms of Agreement

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1997

FORM A
For use by Members, officers, and employees

RECEIVED
CLERK'S OFFICE
98 MAY 13 AM 8 50
OFFICE OF PUBLIC RECORDS

Jennifer B. Dunn
(Full Name)

432 Cannon HOB
(Mailing Address)

Washington DC 20515

202-225-7761
Daytime Telephone

INSIDE MAIL (6)

HC
(Office Use Only)

Filer Status: [X] Member of the U.S. House of Representatives — State Washington District --; [ ] Officer or Employee — Employing Office

Report Type: [X] Annual (May 15); [ ] Amendment; [ ] Termination — Termination Date

A *$200 penalty* shall be assessed against anyone who files more than 30 days late.

PRELIMINARY INFORMATION — ANSWER EACH OF THESE QUESTIONS

I. Did you or your spouse have "earned" income (e.g., salaries or fees) of $200 or more from any source in the reporting period? **If yes, complete and attach Schedule I.** — Yes [ ] No [X]

II. Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? **If yes, complete and attach Schedule II.** — Yes [ ] No [X]

III. Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? **If yes, complete and attach Schedule III.** — Yes [X] No [ ]

IV. Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset worth more than $1,000 in the reporting period? **If yes, complete and attach Schedule IV.** — Yes [ ] No [X]

V. Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? **If yes, complete and attach Schedule V.** — Yes [X] No [ ]

VI. Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $250 and not otherwise exempt)? **If yes, complete and attach Schedule VI.** — Yes [ ] No [X]

VII. Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $250 from one source)? **If yes, complete and attach Schedule VII.** — Yes [ ] No [X]

VIII. Did you hold any reportable positions on or before the date of filing in the current calendar year? **If yes, complete and attach Schedule VIII.** — Yes [X] No [ ]

IX. Did you have any reportable agreement or arrangement with an outside entity? **If yes, complete and attach Schedule IX.** — Yes [ ] No [X]

Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION — ANSWER EACH OF THESE QUESTIONS

TRUSTS—Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child? — Yes [X] No [ ]

EXEMPTION—Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption? — Yes [ ] No [X]

CERTIFICATION — THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended. The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct or its designee. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil penalties and criminal sanctions (*See* 5 U.S.C. app. 4, §104 and 18 U.S.C. §1001).

SIGNATURE OF REPORTING INDIVIDUAL Jennifer B. Dunn — **DATE** (Month/Day/Year)

1052

SCHEDULE III — ASSETS AND "UNEARNED" INCOME

Name Jennifer B. Dunn | Page 1 of 5

BLOCK A — Asset and/or Income Source

Identify (a) each asset held for investment or production of income with a fair market value exceeding $1,000 at the end of the reporting year, and (b) any other asset or source of income which generated more than $200 in "unearned" income during the year. For rental property or land, provide an address. Provide full names of any mutual funds. For an IRA or retirement plan that is *self directed*, list the underlying assets worth more than $1,000. For an IRA or retirement plan that is not selfdirected, name the institution holding the account.

Exclude: Your personal residence(s) (unless there is rental income), any debt owed to you by your spouse, or by your or your spouse's child, parent, or sibling, any deposits totalling $5,000 or less in personal savings accounts, any financial interests in or income derived from U.S. Government retirement programs.

If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC) or is jointly held (JT), in the optional column on the far left.

BLOCK B — Value of Asset

at close of reporting year. If you use a valuation method other than fair market value, please specify the method used. If an asset was sold and is included only because it generated income, the value should be "None."

BLOCK C — Type of Income

BLOCK D — Amount of Income

For IRA's and retirement plans that are *not* self-directed, you may write in "NA" for income

BLOCK E — Transaction

Indicate if asset was purchased (P), sold (S), or exchanged (E) in reporting year

	BLOCK A	A None	B $1 – $1,000	C $1,001 – $15,000	$15,001 – $50,000	E $50,001 – $100,000	F $100,001 – $250,000	G $250,001 – $500,000	H $500,001 – $1,000,000	I $1,000,001 – $5,000,000	J $5,000,001 – $25,000,000	K $25,000,001 – $50,000,000	L Over $50,000,000	DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Type of Income (Specify For Example Partnership Income or Farm Income)	I None	II $1 – $200	III $201 – $1,000	IV $1,001 – $2,500	V $2,501 – $5,000	VI $5,001 – $15,000	VII $15,001 – $50,000	VIII $50,001 – $100,000	IX $100,001 – $1,000,000	X $1,000,001 – $5,000,000	XI Over $5,000,000	BLOCK E
SP	SP Mega Corp Stock					X								X																	P, S, E
DC	*Examples* Simon & Schuster			Indefinite																Royalties				X				X			P
JT	1st Bank of Paducah KY accounts						X								X										X						
	Cognative Associates Re: Limited Partnership		X											X		X					X										
	IDS High Yield Tax Exempt Fund Class A		X											X								X									
	IDS Cash Management Fund Class A				X									X									X								
	IRA - IDS Flexible Annuity				X									X										N/A							
	Bryant R. Dunn Sub-Trust B			Not Known														X							X						
	Condo: Dessert Island Rancho Mirage, CA #305						X								X						X	(Net Loss)									

For additional assets and unearned income, use next page.

SCHEDULE III — ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Name Jennifer B. Dunn | Page 2 of 5

BLOCK A	BLOCK B												BLOCK C							BLOCK D											BLOCK E
Asset and/or Income Source	Year-End Value of Asset												Type of Income							Amount of Income											Transaction
SP, DC, JT	A None	B $1 – $1,000	C $1,001 – $15,000	D $15,001 – $50,000	E $50,001 – $100,000	F $100,001 – $250,000	G $250,001 – $500,000	H $500,001 – $1,000,000	I $1,000,001 – $5,000,000	J $5,000,001 – $25,000,000	K $25,000,001 – $50,000,000	L Over $50,000,000	DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Type of Income (Specify)	I None	II $1 – $200	III $201 – $1,000	IV $1,001 – $2,500	V $2,501 – $5,000	VI $5,001 – $15,000	VII $15,001 – $50,000	VIII $50,001 – $100,000	IX $100,001 – $1,000,000	X $1,000,001 – $5,000,000	XI Over $5,000,000	P, S, E
National Financial Ctr Thrift Savings Plan					X								X		X									X						

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SCHEDULE IV — TRANSACTIONS

Name Jennifer B. Dunn | Page 3 of 5

Report any purchase, sale, or exchange by you, your spouse, or dependent child during the reporting year of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child, or the purchase or sale of your personal residence, unless it is rented out.

SP, DC, JT	Asset	Type of Transaction: PURCHASE	SALE	EXCHANGE	Date (MO/DAY/YR)	Amount of Transaction: B ($1,001–$15,000)	C ($15,001–$50,000)	D ($50,001–$100,000)	E ($100,001–$250,000)	F ($250,001–$500,000)	G ($500,001–$1,000,000)	H ($1,000,001–$5,000,000)	I ($5,000,001–$25,000,000)	J ($25,000,001–$50,000,000)	K (Over $50,000,000)
SP	*Example:* Mega Corporation Common Stock	X			10-12-97		X								
	Condo: 50% Interest, Dessert Island Rancho Mirage, CA #305; Purchase terms and price agreed to as of December 31, 1997, Transaction to close in 1998.	X			12-31-97			X							

This page may be copied if more space is required.

SCHEDULE V — LIABILITIES

Report liabilities of over $10,000 owed to any one creditor ***at any time*** during the reporting period by you, your spouse, or dependent child. Mark the highest amount owed during the year **Exclude**: Any mortgage on your personal residence (unless it is rented out), loans secured by automobiles, household furniture, or appliances, and liabilities owed to a spouse, or the child, parent, or sibling of you or your spouse. Report ***revolving charge accounts*** only if the balance at the end of the reporting period exceeded $10,000.

SP, DC, JT	Creditor	Type of Liability	Amount of Liability									
			B $10,001 – $15,000	C $15,001 – $50,000	D $50,001 – $100,000	E $100,001 – $250,000	F $250,001 – $500,000	G $500,001 – $1,000,000	H $1,000,001 – $5,000,000	I $5,000,001 – $25,000,000	J $25,000,001 – $50,000,000	K Over $50,000,000
	Example: First Bank of Wilmington, Delaware	Mortgage on 123 Main St., Dover, Del				X						
	Mission Hills Mortgage Corp. PO Box 22017 Santa Ana, CA 92702	Mortgage on Condo:Dessert Island, Rancho Mirage CA #305				X						

SCHEDULE VI — GIFTS

Report the source, a brief description, and the value of all gifts totalling more than $250 received by you, your spouse, or a dependent child from any source during the year

Exclude: Gifts from relatives, gifts of personal hospitality of an individual, local meals, and gifts to a spouse or dependent child that are totally independent of his or her relationship to you. Gifts with a value of $100 or less need not be added towards the $250 disclosure threshold.

Note: The gift rule (House Rule 51) prohibits gifts except as specifically provided in the rule

Source	Description	Value
Example Mr. Joseph H. Smith, Anytown, Anystate	Silver Platter (determination on personal friendship received from Committee on Standards)	$270
N/A		

Use additional sheets if more space is required.

SCHEDULE VIII — POSITIONS

Report all positions, compensated or uncompensated, held during the current calendar year as an officer, director, trustee of an organization, partner, proprietor, representative, employee, or consultant of any corporation, firm, partnership, or other business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States.

Exclude: Positions held in any religious, social, fraternal, or political entities; positions solely of an honorary nature; and positions listed on Schedule I.

Position	Name of Organization
Member - US House Cong. Advisory Board	International Republican Institute

SCHEDULE IX — AGREEMENTS

Identify the date, parties to, and general terms of any agreement or arrangement with respect to: future employment; a leave of absence during the period of government service; continuation or deferral of payments by a former or current employer other than the U.S. Government; or continuing participation in an employee welfare or benefit plan maintained by a former employer.

Date	Parties To	Terms of Agreement

GPO 1998 46-260 (mac)

Use additional sheets if more space is required.

RECEIVED
98 MAY 13 AM 10:48
OFFICE OF THE CLERK
U.S. HOUSE OF REPRESENTATIVES

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1997

Form A
For use by Members, officers, and employees

Thomas Chester Edwards
(Full Name)

2459 Raybirn Building
(Mailing Address)

Washington DC 20515

Daytime Telephone
202-225-6105

HAND DELIVERED
(Office Use Only)

3

Filer Status	[X] Member of the U.S. House of Representatives	State TX	District 11	[ ] Officer or Employee	Employing Office
Report Type	[X] Annual (May 15)	[ ] Amendment		[ ] Termination	Termination Date

A $200 penalty shall be assessed against anyone who files more than 30 days late.

PRELIMINARY INFORMATION -- ANSWER EACH OF THESE QUESTIONS

I Did you or your spouse have "earned" income (e.g., salaries or fees) of $200 or more from any source in the reporting period?
If yes, complete and attach Schedule I. Yes [ ] No [X]

II Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period?
If yes, complete and attach Schedule II. Yes [ ] No [X]

III Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period?
If yes, complete and attach Schedule III. Yes [X] No [ ]

IV Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset worth more than $1,000 in the reporting period?
If yes, complete and attach Schedule IV. Yes [ ] No [X]

V Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period?
If yes, complete and attach Schedule V. Yes [ ] No [X]

VI Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $250 and not otherwise exempt)?
If yes, complete and attach Schedule VI. Yes [ ] No [X]

VII Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $250 from one source)?
If yes, complete and attach Schedule VII. Yes [X] No [ ]

VIII Did you hold any reportable positions on or before the date of filing in the current calendar year?
If yes, complete and attach Schedule VIII. Yes [ ] No [X]

IX Did you have any reportable agreement or arrangement with an outside entity?
If yes, complete and attach Schedule IX. Yes [ ] No [X]

Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION -- ANSWER EACH OF THESE QUESTIONS

TRUSTS--Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child? (See Instructions, pages 10-11.) Yes [ ] No [X]

EXEMPTION Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption? (See Instructions, page 11.) Yes [ ] No [X]

CERTIFICATION -- THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended. The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct or its designee. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil penalties and criminal sanctions (See 5 U.S.C. app. 4, 104 and 18 U.S.C. 1001).

SIGNATURE OF REPORTING INDIVIDUAL Thos. C. Edwards

DATE (Month/Day/Year) May 12, 1998

1058

SCHEDULE III -- ASSETS AND "UNEARNED" INCOME

BLOCK A **Asset and/or Income Source** Identify (a) each asset held for investment or production of income with a fair market value exceeding $1,000 at the end of the reporting year, and (b) any other asset or source of income which generated more than $200 in "unearned" income during the year. For rental property or land, provide an address. Provide full names of any mutual funds. For an IRA or retirement plan that is *self-directed*, list the underlying assets worth more than $1,000. For an IRA or retirement plan that is *not* self-directed, name the institution holding the account **Exclude:** Your personal residence(s) (unless there is rental income), any debt owed to you by your spouse, or by your or your spouse's child, parent, or sibling, any deposits totalling $5,000 or less in personal savings accounts; any financial interests in or income derived from U S. Government retirement programs If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC) or is jointly held (JT), in the optional column on the far left For further information, see Instructions, pages 14-20	BLOCK B **Value of Asset** at close of reporting year If you use a valuation method other than fair market value, please specify the method used If an asset was sold and is included only because it generated income, the value should be "None"	BLOCK C **Type of Income** If other than one of the listed categories, specify the type of income by writing a brief description in this block	BLOCK D **Amount of Income** For IRA's and retirement plans that are *not* self-directed, you may write in "NA" for income	BLOCK E **Transaction** Indicate if asset was purchased(P), sold(S), or exchanged(E) in reporting year
SP DC *Examples* JT	Mega Corp Stock SP 123 Main St , Dover, Del 1st Bank of Paducah, KY accounts	$15,001 - $50,000 $250,001 - $500,000 $50,001 - $100,000	Dividends Rent Interest	$201 - $1,000 $1,001 - $2,500 $5,001 - $15,000	P
JT	Wright Patman Credit Union	$15,001 - $50,000	Interest	$201 - $1,000	
JT	Central National Bank	$1,001 - $15,000	Interest	$1 - $200	
JT	Federal Thrift Savings Plan	$100,001 - $250,000	N/A	None	
SP	Great American Reserve Insurance Retirment Account	$1,001 - $15,000	N/A	None	
	Employees Retirement System of Texas	$1,001 - $15,000	N/A	None	

SCHEDULE VII -- TRAVEL PAYMENTS AND REIMBURSEMENTS

Identify the source and list travel itinerary, dates, and nature of expenses provided for travel and travel-related expenses totalling more than $250 received by you, your spouse, or a dependent child during the reporting period. Indicate whether a family member accompanied the traveler at the sponsor's expense, and the amount of time, if any, that was not at the sponsor's expense. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor.

Exclude: Travel-related expenses provided by federal, state and local governments, or by a foreign government required to be separately reported under the Foreign Gifts and Decorations Act (5 U.S.C. 7342), travel paid for by a Federal political committee, travel provided to a spouse or dependent child that is totally independent of his or her relationship to you. For further information, see Instructions, pages 24-26.

Source	Date(s)	Point of Departure--Destination--Point of Return	Lodging? (Y/N)	Food? (Y/N)	Was a Family Member Included? (Y/N)	Any time not at sponsor's expense
Examples Chicago Chamber of Commerce	Mar 2	Wash., D.C.-Chicago-Wash., D.C.	N	N	N	N
Mega Corporation	Aug 6-13	Wash., D.C.-Los Angeles-Cleveland	Y	Y	Y	4 Days
National Assn. of Homebldrs	Jan 25-26	Houston, Texas	Y	Y	Y	N
Aspen Institute	Mar 7-9	DC-Hersey, PA-DC	Y	Y	Y	N
Corning Incorporated	Oct 31-Nov 2	DC-Augusta, GA	Y	Y	N	N

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1997

FORM A
For use by Members, officers, and employees

98 MAY 15 PM 1:55

Vernon J. Ehlers
(Full Name)
1848 Morningside Dr. SE
(Mailing Address)
Grand Rapids, MI 49506

202-225-3831
Daytime Telephone

(5)

MC
(Office Use Only)

Filer Status	☒ Member of the U.S. House of Representatives	State MI District 3	☐ Officer or Employee	Employing Office	A *$200 penalty* shall be assessed against anyone who files more than 30 days late.
Report Type	☒ Annual (May 15)	☐ Amendment		☐ Termination Termination Date	

PRELIMINARY INFORMATION — ANSWER EACH OF THESE QUESTIONS

I. Did you or your spouse have "earned" income (e.g., salaries or fees) of $200 or more from any source in the reporting period? **If yes, complete and attach Schedule I.** — Yes ☐ No ☑

II. Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? **If yes, complete and attach Schedule II.** — Yes ☑ No ☐

III. Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? **If yes, complete and attach Schedule III.** — Yes ☑ No ☐

IV. Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset worth more than $1,000 in the reporting period? **If yes, complete and attach Schedule IV.** — Yes ☐ No ☑

V. Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? **If yes, complete and attach Schedule V.** — Yes ☐ No ☑

VI. Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $250 and not otherwise exempt)? **If yes, complete and attach Schedule VI.** — Yes ☐ No ☑

VII. Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $250 from one source)? **If yes, complete and attach Schedule VII.** — Yes ☑ No ☐

VIII. Did you hold any reportable positions on or before the date of filing in the current calendar year? **If yes, complete and attach Schedule VIII.** — Yes ☐ No ☑

IX. Did you have any reportable agreement or arrangement with an outside entity? **If yes, complete and attach Schedule IX.** — Yes ☐ No ☑

Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION — ANSWER EACH OF THESE QUESTIONS

TRUSTS — Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child? — Yes ☐ No ☑

EXEMPTION — Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption? — Yes ☐ No ☑

CERTIFICATION — THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended. The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct or its designee. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil penalties and criminal sanctions (*See* 5 U.S.C. app. 4, §104 and 18 U.S.C. §1001).

SIGNATURE OF REPORTING INDIVIDUAL: Vernon J. Ehlers

DATE (Month/Day/Year): 5/14/97

1061

SCHEDULE II — PAYMENTS IN LIEU OF HONORARIA MADE TO CHARITY

List the source, activity (i.e., speech, appearance, or article), date, and amount of any payment made by the sponsor of an event to a charitable organization in lieu of an honorarium. A separate confidential list of charities receiving such payments must be filed directly with the Committee on Standards of Official Conduct. An envelope for transmitting the list is included in each Member's filing package.

Source	Activity	Date	Amount
Examples Association of American Associations, Wash., D.C. / XYZ Magazine	Speech / Article	Feb. 2, 1997 / Aug. 13, 1997	$2,000 / $500
Univ. of Michigan, Ann Arbor	Lecture	April 4, 1997	$1000.00
Univ. of Maryland, College Park	Lecture	Nov. 18, 1997	250.00

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SCHEDULE III — ASSETS AND "UNEARNED" INCOME

Name: Vernon J. Ehlers — Page 3 of 5

BLOCK A — Asset and/or Income Source

Identify (a) each asset held for investment or production of income with a fair market value exceeding $1,000 at the end of the reporting year, and (b) any other asset or source of income which generated more than $200 in "unearned" income during the year. For rental property or land, provide an address. Provide full names of any mutual funds. For an IRA or retirement plan that is *self-directed*, list the underlying assets worth more than $1,000. For an IRA or retirement plan that is not self-directed, name the institution holding the account.

Exclude: Your personal residence(s) (unless there is rental income), any debt owed to you by your spouse, or by your or your spouse's child, parent, or sibling, any deposits totalling $5,000 or less in personal savings accounts; any financial interests in or income derived from U.S. Government retirement programs.

If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC) or is jointly held (JT), in the optional column on the far left.

BLOCK B — Value of Asset

at close of reporting year.
If you use a valuation method other than fair market value, please specify the method used.
If an asset was sold and is included only because it generated income, the value should be "None."

BLOCK C — Type of Income

BLOCK D — Amount of Income

For IRA's and retirement plans that are *not* self-directed, you may write in "NA" for income.

BLOCK E — Transaction

Indicate if asset was purchased (P), sold (S), or exchanged (E) in reporting year.

	BLOCK A		BLOCK B													BLOCK C							BLOCK D										BLOCK E
			A None	B $1 – $1,000	C $1,001 – $15,000	$15,001 – $50,000	E $50,001 – $100,000	F $100,001 – $250,000	G $250,001 – $500,000	H $500,001 – $1,000,000	I $1,000,001 – $5,000,000	J $5,000,001 – $25,000,000	K $25,000,001 – $50,000,000	L Over $50,000,000	DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Type of Income (Specify. For Example: Partnership Income or Farm Income)	I None	II $1 – $200	III $201 – $1,000	IV $1,001 – $2,500	V $2,501 – $5,000	VI $5,001 – $15,000	VII $15,001 – $50,000	VIII $50,001 – $100,000	IX $100,001 – $1,000,000	X $1,000,001 – $5,000,000	XI Over $5,000,000	
SP DC JT		*Examples*		Indefinite			X							X							Royalties											P
								X								X										X			X			
SP	Social Security														Social	Security								X									
SP	IRA, NBD Bank, Grand Rapids MI				X											X						NA										
	" " " " " "				X											X						NA										
	State of MI Retirement Acct.					X										X						NA										
	" " " 401(k) Acct.						X									X						NA										
	" " " Deferred Comp Acct.						X									X						NA										

For additional assets and unearned income, use next page.

SCHEDULE III — ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Name: Vernon J. Ehlers | Page 4 of 5

SP. DC. JT	BLOCK A: Asset and/or Income Source	BLOCK B: Year-End Value of Asset											BLOCK C: Type of Income						BLOCK D: Amount of Income										BLOCK E: Transaction
		A None	B $1 – $1,000	C $1,001 – $15,000	D $15,001 – $50,000	E $50,001 – $100,000	F $100,001 – $250,000	G $250,001 – $500,000	H $500,001 – $1,000,000	I $1,000,001 – $5,000,000	J $5,000,001 – $25,000,000	K $25,000,001 – $50,000,000	L Over $50,000,000	DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Type of Income (Specify)	I None	II $1 – $200	III $201 – $1,000	IV $1,001 – $2,500	V $2,501 – $5,000	VI $5,001 – $15,000	VII $15,001 – $50,000	VIII $50,001 – $100,000	IX $100,001 – $1,000,000	X $1,000,001 – $5,000,000	XI Over $5,000,000	P, S, E
	Kent County Retirement Acct		X												X														
	Calvin College Retirement Acct							X					X		X						NA								
	c/o TIAA-CREF																												
	New York, NY																												

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SCHEDULE VII —TRAVEL PAYMENTS AND REIMBURSEMENTS

Identify the source and list travel itinerary, dates, and nature of expenses provided for travel and travel-related expenses totalling more than $250 received by you, your spouse, or a dependent child during the reporting period. Indicate whether a family member accompanied the traveler at the sponsor's expense, and the amount of time, if any, that was not at the sponsor's expense. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor.

Exclude: Travel-related expenses provided by federal, state, and local governments, or by a foreign government required to be separately reported under the Foreign Gifts and Decorations Act (5 U.S.C. § 7342); travel paid for by a Federal political committee; travel provided to a spouse or dependent child that is totally independent of his or her relationship to you.

Source	Date(s)	Point of Departure—Destination—Point of Return	Lodging? (Y/N)	Food? (Y/N)	Was a Family Member Included? (Y/N)	Any time not at sponsor's expense
Examples						
Chicago Chamber of Commerce	Mar 2	Wash . D C —Chicago—Wash . D C	N	N	N	N
Roycroft Corporation	Aug. 6–13	Wash., D C —Los Angeles—Cleveland	Y	Y	Y	4 Days
Univ. of Michigan, Ann Arbor	Apr. 3-4	G.R., MI - Ann Arbor, MI - G.R.	Y	N	N	N
Aspen Institute	Mar. 7-9	Wash. D.C. - Hershey PA - Washington D.C.	Y	Y	Y	N
Univ. of California, Berkeley	Apr. 20-22	Wash. DC - L.A. CA - Berkeley - D.C.	Y	N	N	N
Univ. of Illinois, Champaign	Dec. 15-16					
" " " "	" " "	G.R. MI - Champ, IL - G.R. MI	Y	N	N	N

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HAND DELIVERED

98 MAY 19 AM 11:42

Congress of the United States of America
House of Representatives

Vernon J. Ehlers — May 19, 1998 — Michigan

(1)

The Honorable Robin Carle
Clerk of the House
Legislative Resource Center
B106 Cannon Building
Washington, D.C. 20515-0004

Dear Ms. Carle,

When signing my Financial Disclosure Statement for calendar year 1997, I inadvertently dated the document 5/14/97.

The document should have been dated 5/14/98.

Sincerely,

Vernon J. Ehlers

Vernon J. Ehlers
Member of Congress

VJE:db

1717 Longworth Building, Washington, DC 20515 • 202-225-3831 • FAX 202-225-5144 • INTERNET rep.ehlers@mail.house.gov

Science Committee — Transportation and Infrastructure Committee — House Oversight Committee

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1997

FORM A
For use by Members, officers, and employees

98 MAY -4 PM 4:48

OFFICE OF THE CLERK
U.S. HOUSE OF REPRESENTATIVES

HAND DELIVERED (7)

(Office Use Only)

ROBERT LEROY EHRLICH, JR.
(Full Name)

4 BALLYHEAN CT. TIMONIUM, MARYLAND 21093
(Mailing Address)

(410) 252-4180
Daytime Telephone

Filer Status	☑ Member of the U.S. House of Representatives	State MARYLAND District 2ND	☐ Officer or Employee	Employing Office
Report Type	☑ Annual (May 15)	☐ Amendment	☐ Termination	Termination Date

A *$200 penalty* shall be assessed against anyone who files more than 30 days late.

PRELIMINARY INFORMATION — ANSWER EACH OF THESE QUESTIONS

I Did you or your spouse have "earned" income (e.g., salaries or fees) of $200 or more from any source in the reporting period? **If yes, complete and attach Schedule I.** — Yes ☑ No ☐

II Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? **If yes, complete and attach Schedule II.** — Yes ☐ No ☑

III Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? **If yes, complete and attach Schedule III.** — Yes ☑ No ☐

IV Did you, your spouse, or dependent child purchase, sell or exchange any reportable asset worth more than $1,000 in the reporting period? **If yes, complete and attach Schedule IV.** — Yes ☑ No ☐

V Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? **If yes, complete and attach Schedule V.** — Yes ☐ No ☑

VI Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $250 and not otherwise exempt)? **If yes, complete and attach Schedule VI.** — Yes ☐ No ☑

VII Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $250 from one source)? **If yes, complete and attach Schedule VII** — Yes ☑ No ☐

VIII Did you hold any reportable positions on or before the date of filing in the current calendar year? **If yes, complete and attach Schedule VIII.** — Yes ☑ No ☐

IX Did you have any reportable agreement or arrangement with an outside entity? **If yes, complete and attach Schedule IX.** — Yes ☐ No ☑

Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION — ANSWER EACH OF THESE QUESTIONS

TRUSTS—Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child? — Yes ☐ No ☑

EXEMPTION—Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption? — Yes ☐ No ☑

CERTIFICATION — THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended. The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct or its designee. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil penalties and criminal sanctions (*See* 5 U.S.C. app. 4, §104 and 18 U.S.C. §1001).

SIGNATURE OF REPORTING INDIVIDUAL: Robert T. Ehrlich

DATE (Month/Day/Year): April 13, 1998

1067

SCHEDULE I — EARNED INCOME

List the source, type, and amount of earned income from any source (other than the filer's current employment by the U.S. Government) totalling $200 or more during the preceding calendar year. For a spouse, list the source and amount of any honoraria; list only the source for other spouse earned income exceeding $1,000.

Source	Type	Amount
Examples Keene State	Approved Teaching Fee	$6,000
State of Maryland	Legislative Pension	$9,000
Civil War Roundtable (Oct 2nd)	Spouse Speech	$1,000
Ontario County Board of Education	Spouse Salary	NA
YOUTH SERVICES INTERNATIONAL — CORPORATE COUNSEL	SPOUSE SALARY	N/A
CONSULTANT	SPOUSE SALARY	N/A
HARFORD COUNTY, MARYLAND - ASSISTANT STATES ATTORNEY	SPOUSE SALARY	N/A

For payments to charity in lieu of honoraria, use Schedule II.

SCHEDULE III — ASSETS AND "UNEARNED" INCOME

Name Robert L. Ehrlich Jr. | Page 3 of 7

BLOCK A — Asset and/or Income Source

Identify (a) each asset held for investment or production of income with a fair market value exceeding $1,000 at the end of the reporting year, and (b) any other asset or source of income which generated more than $200 in "unearned" income during the year. For rental property or land, provide an address. Provide full names of any mutual funds. For an IRA or retirement plan that is *self-directed*, list the underlying assets worth more than $1,000. For an IRA or retirement plan that is not self-directed, name the institution holding the account.

Exclude: Your personal residence(s) (unless there is rental income), any debt owed to you by your spouse, or by your or your spouse's child, parent, or sibling, any deposits totalling $5,000 or less in personal savings accounts, any financial interests in or income derived from U.S. Government retirement programs.

If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC) or is jointly held (JT), in the optional column on the far left.

BLOCK B — Value of Asset

at close of reporting year. If you use a valuation method other than fair market value, please specify the method used. If an asset was sold and is included only because it generated income, the value should be "None."

BLOCK C — Type of Income

BLOCK D — Amount of Income

For IRA's and retirement plans that are *not* self-directed, you may write in "NA" for income.

BLOCK E — Transaction

Indicate if asset was purchased (P), sold (S), or exchanged (E) in reporting year.

	BLOCK A	BLOCK B												BLOCK C							BLOCK D										BLOCK E
		A None	B $1 – $1,000	C $1,001 – $15,000	D $15,001 – $50,000	E $50,001 – $100,000	F $100,001 – $250,000	G $250,001 – $500,000	H $500,001 – $1,000,000	I $1,000,001 – $5,000,000	J $5,000,001 – $25,000,000	K $25,000,001 – $50,000,000	L Over $50,000,000	DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Type of Income (Specify. For Example: Partnership Income or Farm Income)	I None	II $1 – $200	III $201 – $1,000	IV $1,001 – $2,500	V $2,501 – $5,000	VI $5,001 – $15,000	VII $15,001 – $50,000	VIII $50,001 – $100,000	IX $100,001 – $1,000,000	X $1,000,001 – $5,000,000	XI Over $5,000,000	P, S, E
SP.														X																	P
DC.	*Examples*		Indefinite			X										X				Royalties				X				X			
JT							X																		X						
	FUNDAMENTAL INVESTORS M.F.			X										X			X								X						
	NEW PROSPECTIVE M.F.			X										X			X						X								
	A.I.M. CONSTELLATION M.F.			X										X			X						X								
	EURO PACIFIC M.F.			X										X			X						X								
	FLAGG INVESTORS M.F.			X										X			X						X								
	MAIN STREET M.F.		X											X			X						X								

For additional assets and unearned income, use next page.

1069

SCHEDULE III — ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Name Robert L. Ehrlich, Jr. Page 4 of 7

	BLOCK A Asset and/or Income Source	BLOCK B Year-End Value of Asset											BLOCK C Type of Income						BLOCK D Amount of Income										BLOCK E Transaction
SP, DC, JT		A None	B $1 – $1,000	C $1,001 – $15,000	D $15,001 – $50,000	E $50,001 – $100,000	F $100,001 – $250,000	G $250,001 – $500,000	H $500,001 – $1,000,000	I $1,000,001 – $5,000,000	J $5,000,001 – $25,000,000	K $25,000,001 – $50,000,000	L Over $50,000,000	DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Type of Income (Specify)	I None	II $1 – $200	III $201 – $1,000	IV $1,001 – $2,500	V $2,501 – $5,000	VI $5,001 – $15,000	VII $15,001 – $50,000	VIII $50,001 – $100,000	IX $100,001 – $1,000,000	X $1,000,001 – $5,000,000	XI Over $5,000,000	P, S, E
	CAP APPRECIATION FUND A M.F.			X										X			X							X						
	DISCOVERY FUND A M.F.			X										X			X							X						
SP	DU PONT STOCK			X										X			X					X									P
	IRA (CAP. GUARDIAN TRUST CO.)																														
	AMERICAN BALANCED M.F.			X										X			X							X						
	EURO PACIFIC M.F.			X										X			X					X		[redacted]						
	FUNDAMENTAL INVESTORS M.F.				X									X			X							X						
	NEW PERSPECTIVE M.F.			X										X			X					X								
	SMALL CAP M.F.			X										X			X							X						
	WASH. MUTUAL M.F.				X									X			X								X					

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SCHEDULE IV — TRANSACTIONS

Name ROBERT L. EHRLICH, JR. Page 5 of 7

Report any purchase, sale, or exchange by you, your spouse, or dependent child during the reporting year of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child, or the purchase or sale of your personal residence, unless it is rented out.

SP, DC, JT	Asset	Type of Transaction: PURCHASE	SALE	EXCHANGE	Date (MO/DAY/YR)	Amount of Transaction: B ($1,001–$15,000)	C ($15,001–$50,000)	D ($50,001–$100,000)	E ($100,001–$250,000)	F ($250,001–$500,000)	G ($500,001–$1,000,000)	H ($1,000,001–$5,000,000)	I ($5,000,001–$25,000,000)	J ($25,000,001–$50,000,000)	K (Over $50,000,000)
SP	*Example* Mega Corporation Common Stock	X			10–12–97		X								
	FUNDAMENTAL INVESTORS: DIVIDEND REINVESTMENT AND MONTHLY PURCHASES (JAN., FEB., MAY, JUNE, AUG., SEPT., OCT., NOV., DEC.) EXCEEDED $1000.00 IN CALENDAR YEAR.					X									
	NEW PERSPECTIVE: DIVIDEND REIMBURSEMENT AND MONTHLY PURCHASES (JAN, FEB., MARCH, APRIL, MAY, JUNE, JULY, AUG., OCT., DEC.) EXCEEDED $1000.00 IN CALENDAR YEAR.					X									
	CAP APPRECIATION A: DIVIDEND REIMBURSEMENT AND MONTHLY PURCHASES ($100.00/MO.) EXCEEDED $1000.00 IN CALENDAR YEAR.					X									
	DISCOVERY A: DIVIDEND REIMBURSEMENT AND MONTHLY PURCHASES ($100.00/MO.) EXCEEDED $1,000.00 IN CALENDAR YEAR.					X									
	ALL OTHER FUNDS: DIVIDEND REINVESTMENT AND/OR PURCHASES DID NOT EXCEED $1000.00 IN THE CALENDAR YEAR.														

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SCHEDULE VII —TRAVEL PAYMENTS AND REIMBURSEMENTS

Identify the source and list travel itinerary, dates, and nature of expenses provided for travel and travel-related expenses totalling more than $250 received by you, your spouse, or a dependent child during the reporting period. Indicate whether a family member accompanied the traveler at the sponsor's expense, and the amount of time, if any, that was not at the sponsor's expense. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor.

Exclude: Travel-related expenses provided by federal, state, and local governments, or by a foreign government required to be separately reported under the Foreign Gifts and Decorations Act (5 U.S.C. § 7342); travel paid for by a Federal political committee; travel provided to a spouse or dependent child that is totally independent of his or her relationship to you.

Source	Date(s)	Point of Departure—Destination—Point of Return	Lodging? (Y/N)	Food? (Y/N)	Was a Family Member Included? (Y/N)	Any time not at sponsor's expense
Examples						
Chicago Chamber of Commerce	Mar. 2	Wash., D.C.—Chicago—Wash., D.C.	N	N	N	N
Roycroft Corporation	Aug. 6–13	Wash., D.C.—Los Angeles—Cleveland	Y	Y	Y	4 Days
INDEPENDENT BANKERS ASSOCIATION	FEB. 23-24	NAPLES, FLA - BOCA RATON, FLA. - BALTO.	Y	Y	Y (WIFE)	N
FEDERALIST SOCIETY, UNIV. OF VIR.	APRIL 21-22	BALTO. - CHARLOTTESVILLE - BALTO.	Y	N	Y (WIFE)	N
NAT. ASS. OF MORTGAGE BROKERS	JUNE 22-23	BALTO. - ATLANTA - BALTO.	Y	Y	N	N
MARYLAND ASPHALT ASSN.	SEPT. 12-13	BALTO. - ST. MICHAELS, MD. - BALTO.	Y	Y	Y (WIFE)	N
FINANCIAL MGR. SOCIETY	OCT. 5-6	BALTO. - MYRTLE BEACH, S.C. - BALTO.	Y	Y	N	N
DUVAL COUNTY, FLA. REP. PARTY	NOV. 2-4	BALTO. - JACKSONVILLE, FLA. - BALTO.	Y	Y	Y (WIFE)	1 DAY
CEEI ECONOMIC SUMMIT	NOV. 18-24	WASH. - PARIS, FRANCE - WASH.	Y	Y	Y (WIFE)	N

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SCHEDULE VIII — POSITIONS

Report all positions, compensated or uncompensated, held during the current calendar year as an officer, director, trustee of an organization, partner, proprietor, representative, employee, or consultant of any corporation, firm, partnership, or other business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States.

Exclude: Positions held in any religious, social, fraternal, or political entities; positions solely of an honorary nature; and positions listed on Schedule I.

Position	Name of Organization
	DELETE POSITIONS WITH RELIGIOUS, SOCIAL, FRATERNAL, AND POLITICAL ORGANIZATIONS ARE OF AN HONORARY NATURE.

SCHEDULE IX — AGREEMENTS

Identify the date, parties to, and general terms of any agreement or arrangement with respect to: future employment; a leave of absence during the period of government service; continuation or deferral of payments by a former or current employer other than the U.S. Government, or continuing participation in an employee welfare or benefit plan maintained by a former employer.

Date	Parties To	Terms of Agreement

GPO 1998 46-260 (mac)

Use additional sheets if more space is required.

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LEGISLATIVE RESOURCE CENTER
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98 MAY 12 PM 12:07
OFFICE OF THE CLERK
U.S. HOUSE OF REPRESENTATIVES

197

ROBERT L. EHRLICH, JR.
2D DISTRICT, MARYLAND

315 CANNON HOUSE OFFICE BUILDING
WASHINGTON, DC 20515
(202) 225-3061

COMMITTEES

BUDGET

BANKING AND FINANCIAL SERVICES
SUBCOMMITTEE ON FINANCIAL INSTITUTIONS AND CONSUMER CREDIT
SUBCOMMITTEE ON HOUSING AND COMMUNITY OPPORTUNITY

ASSISTANT MAJORITY WHIP

Congress of the United States
House of Representatives
Washington, DC 20515–2002

DISTRICT OFFICES:
1407 YORK ROAD
SUITE 304
LUTHERVILLE, MD 21093
(410) 337-7222

45 NORTH MAIN STREET
BEL AIR, MD 21014
(410) 838-2517

GOVERNMENT BUILDING
7701 WISE AVENUE
2ND FLOOR
DUNDALK, MD 21222
(410) 284-6828

1011 OLD EASTERN AVENUE
ESSEX, MD 21221
(410) 780-3911

LAKE SHORE PROFESSIONAL BLDG.
4231 POSTAL COURT
SUITE 204
PASADENA, MD 21122
(410) 255-8883

April 28, 1998

The Honorable Robin H. Carle
Clerk, U.S. House of Representatives
Legislative Resource Center
B-106 Cannon House Office Building
Washington, D.C. 20515-6612

1

MC ✓

Dear Ms. Carle:

In regard to my financial statement for calendar year 1996, kindly note the following addition to schedule IV:

Dividend reinvestment and/or monthly purchase of additional funds exceeded $1,000.00 in the calendar year 1996 for Fundamental Investors Mutual Fund and New Perspective Mutual Fund.

All other funds: Dividend reimbursement did not exceed $1000.00 in the calendar year.

Thank you for your kind attention in this matter.

Sincerely,

Robert L. Ehrlich, Jr.
Member of Congress

PRINTED ON RECYCLED PAPER

ROBERT L. EHRLICH, JR
2D DISTRICT, MARYLAND
315 CANNON HOUSE OFFICE BUILDING
WASHINGTON, DC 20515
(202) 225-3061
COMMITTEES
BUDGET
BANKING AND FINANCIAL SERVICES
SUBCOMMITTEE ON FINANCIAL INSTITUTIONS AND CONSUMER CREDIT
SUBCOMMITTEE ON HOUSING AND COMMUNITY OPPORTUNITY
ASSISTANT MAJORITY WHIP

Congress of the United States
House of Representatives
Washington, DC 20515–2002

June 9, 1998

DISTRICT OFFICES
1407 YORK ROAD
SUITE 304
LUTHERVILLE MD 21093
(410) 337 7222
45 NORTH MAIN STREET
BEL AIR MD 21014
(410) 838-2517
GOVERNMENT BUILDING
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1011 OLD EASTERN AVENUE
ESSEX MD 21221
(410) 780-3911
LAKE SHORE PROFESSIONAL BLDG
4231 POSTAL COURT
SUITE 204
PASADENA, MD 21122
(410) 255-6983

The Honorable Robin H. Carle
Clerk, U.S. House of Representatives
Legislative Resource Center
B-106 Cannon House Office Building
Washington, D.C. 20515-6612

HAND DELIVERED

MC ✓ (1)

Dear Ms. Carle:

Regarding my 1997 Financial Disclosure Statement filed with the Clerk of the House on May 4, 1998, please amend as follows:

Schedule IV - "Transactions" is amended to include the purchase of 80 shares of Du Pont stock as referenced on schedule III.

Thank you for your kind attention to this matter.

Sincerely,

Robert L. Ehrlich, Jr.
Member of Congress

RECEIVED
98 JUN -9 PM 2:50

PRINTED ON RECYCLED PAPER

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1997

Form A
For use by Members, officers, and employees

98 MAY 15 AM 10:09

Jo Ann Emerson
(Full Name)

2210 Lakewood
(Mailing Address)

Cape Girardeau MO 73701

Daytime Telephone
202-225-4404

HAND DELIVERED (5)
(Office Use Only)

Filer Status	[X]	Member of the U S House of Representatives	State / District	MO / 08	[ ]	Officer or Employee — Employing Office
Report Type	[X]	Annual (May 15)	[ ]	Amendment	[ ]	Termination — Termination Date

A $200 penalty shall be assessed against anyone who files more than 30 days late.

PRELIMINARY INFORMATION -- ANSWER EACH OF THESE QUESTIONS

I Did you or your spouse have "earned" income (e.g., salaries or fees) of $200 or more from any source in the reporting period? **If yes, complete and attach Schedule I.**	Yes [ ]	No [X]	VI Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $250 and not otherwise exempt)? **If yes, complete and attach Schedule VI.**	Yes [ ]	No [X]
II Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? **If yes, complete and attach Schedule II.**	Yes [ ]	No [X]	VII Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $250 from one source)? **If yes, complete and attach Schedule VII.**	Yes [X]	No [ ]
III Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? **If yes, complete and attach Schedule III.**	Yes [X]	No [ ]	VIII Did you hold any reportable positions on or before the date of filing in the current calendar year? **If yes, complete and attach Schedule VIII.**	Yes [X]	No [ ]
IV Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset worth more than $1,000 in the reporting period? **If yes, complete and attach Schedule IV.**	Yes [ ]	No [X]	IX Did you have any reportable agreement or arrangement with an outside entity? **If yes, complete and attach Schedule IX.**	Yes [ ]	No [X]
V Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? **If yes, complete and attach Schedule V.**	Yes [X]	No [ ]	**Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.**		

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION -- ANSWER EACH OF THESE QUESTIONS

TRUSTS Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child? (See Instructions, pages 10-11.)	Yes [ ]	No [X]
EXEMPTION Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption? (See Instructions, page 11.)	Yes [ ]	No [X]

CERTIFICATION -- THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended. The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct or its designee. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil penalties and criminal sanctions (See 5 U.S.C. app. 4, 104 and 18 U.S.C. 1001)

SIGNATURE OF REPORTING INDIVIDUAL Jo Ann Emerson DATE (Month/Day/Year) 5/15/98

1076

SCHEDULE III -- ASSETS AND "UNEARNED" INCOME

BLOCK A **Asset and/or Income Source** Identify (a) each asset held for investment or production of income with a fair market value exceeding $1,000 at the end of the reporting year, and (b) any other asset or source of income which generated more than $200 in "unearned" income during the year. For rental property or land, provide an address. Provide full names of any mutual funds. For an IRA or retirement plan that is *self-directed*, list the underlying assets worth more than $1,000. For an IRA or retirement plan that is *not* self-directed, name the institution holding the account. **Exclude:** Your personal residence(s) (unless there is rental income), any debt owed to you by your spouse, or by your or your spouse's child, parent, or sibling, any deposits totalling $5,000 or less in personal savings accounts, any financial interests in or income derived from U.S. Government retirement programs. If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC) or is jointly held (JT), in the optional column on the far left. For further information, see Instructions, pages 14-20	BLOCK B **Value of Asset** at close of reporting year If you use a valuation method other than fair market value, please specify the method used. If an asset was sold and is included only because it generated income, the value should be "None."	BLOCK C **Type of Income** If other than one of the listed categories, specify the type of income by writing a brief description in this block	BLOCK D **Amount of Income** For IRA's and retirement plans that are *not* self-directed, you may write in "NA" for income	BLOCK E **Transaction** Indicate if asset was purchased(P), sold(S), or exchanged(E) in reporting year
SP DC, *Examples* SP JT	Mega Corp. Stock 123 Main St., Dover, Del 1st Bank of Paducah, KY accounts	$15,001 - $50,000 $250,001 - $500,000 $50,001 - $100,000	Dividends Rent Interest	$201 - $1,000 $1,001 - $2,500 $5,001 - $15,000	P
	2210 Lakewood, Cape Girardeau, MO 63701	$100,001 - $250,000	Rent (utilities)	$1,001 - $2,500	
	Methfe, Investment & Fiduciary Services, 485-B Metropolitan Corp. Iselin, NJ 08830	$250,001 - $500,000	Interest	$5,001 - $15,000	

SCHEDULE V -- LIABILITIES

Report liabilities of over $10,000 owed to any one creditor ***at any time*** during the reporting period by you, your spouse, or dependent child. Mark the highest amount owed during the year.
Exclude: Any mortgage on your personal residence (unless it is rented out), loans secured by automobiles, household furniture, or appliances, and liabilities owed to a spouse, or the child, parent, or sibling of you or your spouse. Report ***revolving charge accounts*** only if the balance at the end of the reporting period exceeded $10,000. For further information, see Instructions, pages 21-22

SP,DC,JT	Creditor	Type of Liability	Amount of Liability
	Example. First Bank of Wilmington, Delaware	Mortgage on 123 Main St., Dover, Del	$100,001 - $250,000
	Nations Bank, Cape Girardeau, MO 63701	Mortgage on 2210 Lakewood, Cape Girardeau, MO 63701	$100,001 - $250,000

SCHEDULE VII -- TRAVEL PAYMENTS AND REIMBURSEMENTS

Identify the source and list travel itinerary, dates, and nature of expenses provided for travel and travel-related expenses totalling more than $250 received by you, your spouse, or a dependent child during the reporting period. Indicate whether a family member accompanied the traveler at the sponsor's expense, and the amount of time, if any, that was not at the sponsor's expense. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor.

Exclude: Travel-related expenses provided by federal, state and local governments, or by a foreign government required to be separately reported under the Foreign Gifts and Decorations Act (5 U.S.C. 7342), travel paid for by a Federal political committee, travel provided to a spouse or dependent child that is totally independent of his or her relationship to you. For further information, see Instructions, pages 24-26.

Source	Date(s)	Point of Departure–Destination–Point of Return	Lodging? (Y/N)	Food? (Y/N)	Was a Family Member Included? (Y/N)	Any time not at sponsor's expense
Examples Chicago Chamber of Commerce	Mar 2	Wash., D.C.-Chicago-Wash., D.C.	N	N	N	N
Mega Corporation	Aug 6-13	Wash., D.C.-Los Angeles-Cleveland	Y	Y	Y	4 Days
Aspen Institute	March 7-9	Wash., D.C. - Hershey, PA-Wash., D.C.	Y	Y	N	None

1079

SCHEDULE VIII -- POSITIONS

Report all positions, compensated or uncompensated, held during the current calendar year as an officer, director, trustee of an organization, partner, proprietor, representative, employee, or consultant of any corporation, firm, partnership, or other business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States. For further information, see Instructions, page 26.

Exclude: Positions held in any religious, social, fraternal, or political entities; positions solely of an honorary nature; and positions listed on Schedule I.

Position	Organization
Member, Advisory Committee	Arneson Institute for Practical Politics and Public Affairs, Ohio Wesleyan University, Delaware, OH
Member, Advisory Board	Members' and Family Committee, US House of Representatives
Member	Cooper Dome Society, Southeast Missouri State University, Cape Girardeau, MO
Advisory Committee	Children's Inn at National Institute of Health
Advisory Committee	Susan B. Anthony List, Alexandria, VA
Advisory Committee	ViewPAC, Washington, DC

1080

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1997

FORM A
For use by Members, officers, and employees

RECEIVED
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Rep. Eliot L. Engel
(Full Name)

2303 Rayburn House Office Building
(Mailing Address)

Washington, DC 20515

202/225-2464
Daytime Telephone

MC (4)
HAND DELIVERED
(Office Use Only)

Filer Status [X] Member of the U S House of Representatives — State New York District 17th — [ ] Officer or Employee — Employing Office

Report Type [X] Annual (May 15) — [ ] Amendment — [ ] Termination — Termination Date

A *$200 penalty* shall be assessed against anyone who files more than 30 days late.

PRELIMINARY INFORMATION — ANSWER EACH OF THESE QUESTIONS

I Did you or your spouse have "earned" income (e g , salaries or fees) of $200 or more from any source in the reporting period? **If yes, complete and attach Schedule I.** — Yes [ ] No [X]

II Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? **If yes, complete and attach Schedule II.** — Yes [ ] No [X]

III Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? **If yes, complete and attach Schedule III.** — Yes [X] No [ ]

IV Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset worth more than $1,000 in the reporting period? **If yes, complete and attach Schedule IV.** — Yes [ ] No [X]

V Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? **If yes, complete and attach Schedule V.** — Yes [X] No [ ]

VI Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i e , aggregating more than $250 and not otherwise exempt)? **If yes, complete and attach Schedule VI.** — Yes [ ] No [X]

VII Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $250 from one source)? **If yes, complete and attach Schedule VII.** — Yes [X] No [ ]

VIII Did you hold any reportable positions on or before the date of filing in the current calendar year? **If yes, complete and attach Schedule VIII.** — Yes [ ] No [X]

IX Did you have any reportable agreement or arrangement with an outside entity? **If yes, complete and attach Schedule IX.** — Yes [ ] No [X]

Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION — ANSWER EACH OF THESE QUESTIONS

TRUSTS—Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child? — Yes [ ] No [X]

EXEMPTION—Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption? — Yes [ ] No [X]

CERTIFICATION — THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct or its designee Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil penalties and criminal sanctions (*See* 5 U S C app 4, §104 and 18 U S C §1001)

SIGNATURE OF REPORTING INDIVIDUAL Eliot L. Engel

DATE (Month/Day/Year) May 15, 1998

1081

SCHEDULE III — ASSETS AND "UNEARNED" INCOME

Name: Rep. Eliot L. Engel | Page 2 of 4

BLOCK A — Asset and/or Income Source

Identify (a) each asset held for investment or production of income with a fair market value exceeding $1,000 at the end of the reporting year, and (b) any other asset or source of income which generated more than $200 in "unearned" income during the year. For rental property or land, provide an address. Provide full names of any mutual funds. For an IRA or retirement plan that is *self-directed*, list the underlying assets worth more than $1,000. For an IRA or retirement plan that is not selfdirected, name the institution holding the account.

Exclude: Your personal residence(s) (unless there is rental income), any debt owed to you by your spouse, or by your or your spouse's child, parent, or sibling; any deposits totalling $5,000 or less in personal savings accounts, any financial interests in or income derived from U.S. Government retirement programs.

If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC) or is jointly held (JT), in the optional column on the far left

BLOCK B — Value of Asset

at close of reporting year
If you use a valuation method other than fair market value, please specify the method used
If an asset was sold and is included only because it generated income, the value should be "None."

BLOCK C — Type of Income

BLOCK D — Amount of Income

For IRA's and retirement plans that are *not* self-directed, you may write in "NA" for income.

BLOCK E — Transaction

Indicate if asset was purchased (P), sold (S), or exchanged (E) in reporting year.

	Block A	Block B: A None	B $1 – $1,000	C $1,001 – $15,000	D $15,001 – $50,000	E $50,001 – $100,000	F $100,001 – $250,000	G $250,001 – $500,000	H $500,001 – $1,000,000	I $1,000,001 – $5,000,000	J $5,000,001 – $25,000,000	K $25,000,001 – $50,000,000	L Over $50,000,000	Block C: DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Type of Income (Specify. For Example, Partnership Income or Farm Income)	Block D: I None	II $1 – $200	III $201 – $1,000	IV $1,001 – $2,500	V $2,501 – $5,000	VI $5,001 – $15,000	VII $15,001 – $50,000	VIII $50,001 – $100,000	IX $100,001 – $1,000,000	X $1,000,001 – $5,000,000	XI Over $5,000,000	Block E
SP																																P
DC	*Examples*			Indefinite																Royalties												
JT							X									X																
SP	Mega Corp. Stock					X								X																		
	Simon & Schuster																															
	1st Bank of Paducah, KY accounts																															
	Marine Midland		X													X						X										
	Cong Fedl Credit Union				X											X							X									
	Dreyfus Liquid Assets		X											X								X										
	Israeli Bonds			X												X						X										
	Mortgage income recd for property sold in 1995																								X							

For additional assets and unearned income, use next page.

1082

SCHEDULE V — LIABILITIES

Report liabilities of over $10,000 owed to any one creditor ***at any time*** during the reporting period by you, your spouse, or dependent child. Mark the highest amount owed during the year. **Exclude:** Any mortgage on your personal residence (unless it is rented out), loans secured by automobiles, household furniture, or appliances, and liabilities owed to a spouse, or the child, parent, or sibling of you or your spouse. Report ***revolving charge accounts*** only if the balance at the end of the reporting period exceeded $10,000.

SP, DC, JT	Creditor	Type of Liability	Amount of Liability									
			B $10,001–$15,000	C $15,001–$50,000	D $50,001–$100,000	E $100,001–$250,000	F $250,001–$500,000	G $500,001–$1,000,000	H $1,000,001–$5,000,000	I $5,000,001–$25,000,000	J $25,000,001–$50,000,000	K Over $50,000,000
	Example: First Bank of Wilmington, Delaware	Mortgage on 123 Main St., Dover, Del				X						
	Cong Fedl Credit Union	Loan		X								

SCHEDULE VI — GIFTS

Report the source, a brief description, and the value of all gifts totalling more than $250 received by you, your spouse, or a dependent child from any source during the year.

Exclude: Gifts from relatives, gifts of personal hospitality of an individual, local meals, and gifts to a spouse or dependent child that are totally independent of his or her relationship to you. Gifts with a value of $100 or less need not be added towards the $250 disclosure threshold.

Note: The gift rule (House Rule 51) prohibits gifts except as specifically provided in the rule.

Source	Description	Value
Example: Mr. Joseph H. Smith, Anytown, Anystate	Silver Platter (determination on personal friendship received from Committee on Standards)	$270
N/A		

Use additional sheets if more space is required.

SCHEDULE VII —TRAVEL PAYMENTS AND REIMBURSEMENTS

Identify the source and list travel itinerary, dates, and nature of expenses provided for travel and travel-related expenses totalling more than $250 received by you, your spouse, or a dependent child during the reporting period. Indicate whether a family member accompanied the traveler at the sponsor's expense, and the amount of time, if any, that was not at the sponsor's expense. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor.

Exclude: Travel-related expenses provided by federal, state, and local governments, or by a foreign government required to be separately reported under the Foreign Gifts and Decorations Act (5 U.S.C. § 7342); travel paid for by a Federal political committee; travel provided to a spouse or dependent child that is totally independent of his or her relationship to you.

Source	Date(s)	Point of Departure—Destination—Point of Return	Lodging? (Y/N)	Food? (Y/N)	Was a Family Member Included? (Y/N)	Any time not at sponsor's expense
Examples Chicago Chamber of Commerce	Mar 2	Wash., D.C.—Chicago—Wash., D.C.	N	N	N	N
Roycroft Corporation	Aug. 6–13	Wash., D.C.—Los Angeles—Cleveland	Y	Y	Y	4 Days
Maimonides Hebrew Day Schl.	3/16-17	NYC-Albany-Wash,DC	Y	Y	N	N/A
Ross University	3/24-26	Newark-San Juan, PR-Dominca-San Juan-DC	Y	Y	N	N/A
Assoc of American Railroads	4/2-6	NYC-Fort Lauderdale-Wash, DC	Y	Y	Y	N/A
Coalition for Jewish Concerns-Amcha	4/17	NYC-Raleigh,NC-Butner, NC-NYC	N	N	N	N/A
American Crop Protection Assoc.	9/26-29	Wash, DC-Greenbrier, WV-Wash, DC	Y	Y	Y	N/A

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UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1997

FORM A
For use by Members, officers, and employees

(5)

PHILIP S. ENGLISH
(Full Name)
1721 LONGWORTH HOUSE OFFICE BUILDING
(Mailing Address)
WASHINGTON, D.C. 20515
(Daytime Telephone)
(202) 225-5406

(Office Use Only)

Filer Status
- [X] Member of the U.S. House of Representatives — State PENNSYLVANIA District 21
- [ ] Officer or Employee — Employing Office

Report Type
- [X] Annual (May 15)
- [ ] Amendment
- [ ] Termination — Termination Date

A *$200 penalty* shall be assessed against anyone who files more than 30 days late.

PRELIMINARY INFORMATION — ANSWER EACH OF THESE QUESTIONS

I. Did you or your spouse have "earned" income (e.g., salaries or fees) of $200 or more from any source in the reporting period? **If yes, complete and attach Schedule I.** — Yes [X] No [ ]

II. Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? **If yes, complete and attach Schedule II.** — Yes [ ] No [X]

III. Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? **If yes, complete and attach Schedule III.** — Yes [X] No [ ]

IV. Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset worth more than $1,000 in the reporting period? **If yes, complete and attach Schedule IV.** — Yes [ ] No [X]

V. Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? **If yes, complete and attach Schedule V.** — Yes [X] No [ ]

VI. Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $250 and not otherwise exempt)? **If yes, complete and attach Schedule VI.** — Yes [ ] No [X]

VII. Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $250 from one source)? **If yes, complete and attach Schedule VII** — Yes [X] No [ ]

VIII. Did you hold any reportable positions on or before the date of filing in the current calendar year? **If yes, complete and attach Schedule VIII.** — Yes [ ] No [X]

IX. Did you have any reportable agreement or arrangement with an outside entity? **If yes, complete and attach Schedule IX** — Yes [ ] No [X]

Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION — ANSWER EACH OF THESE QUESTIONS

TRUSTS—Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child? — Yes [ ] No [X]

EXEMPTION—Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption? — Yes [ ] No [X]

CERTIFICATION — THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended. The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct or its designee. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil penalties and criminal sanctions (See 5 U.S.C. app. 4, §104 and 18 U.S.C. §1001).

SIGNATURE OF REPORTING INDIVIDUAL: Philip S. English

DATE (Month, Day, Year): 5/14/98

1085

SCHEDULE I — EARNED INCOME

List the source, type, and amount of earned income from any source (other than the filer's current employment by the U.S. Government) totalling $200 or more during the preceding calendar year. For a spouse, list the source and amount of any honoraria; list only the source for other spouse earned income exceeding $1,000.

Source	Type	Amount
Examples Keene State	Approved Teaching Fee	$6,000
State of Maryland	Legislative Pension	$9,000
Civil War Roundtable (Oct 2nd)	Spouse Speech	$1,000
Ontario County Board of Education	Spouse Salary	NA
SCHOOL DISTRICT, CITY OF ERIE	SPOUSE SALARY	NA

For payments to charity in lieu of honoraria, use Schedule II.

Name PHILIP S. ENGLISH Page 3 of 5

SCHEDULE III — ASSETS AND "UNEARNED" INCOME

BLOCK A — Asset and/or Income Source

Identify (a) each asset held for investment or production of income with a fair market value exceeding $1,000 at the end of the reporting year, and (b) any other asset or source of income which generated more than $200 in "unearned" income during the year. For rental property or land, provide an address. Provide full names of any mutual funds. For an IRA or retirement plan that is *self directed*, list the underlying assets worth more than $1,000. For an IRA or retirement plan that is not selfdirected, name the institution holding the account.

Exclude: Your personal residence(s) (unless there is rental income), any debt owed to you by your spouse, or by your or your spouse's child, parent, or sibling, any deposits totalling $5,000 or less in personal savings accounts, any financial interests in or income derived from U.S. Government retirement programs.

If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC) or is jointly held (JT), in the optional column on the far left.

BLOCK B — Value of Asset

at close of reporting year
If you use a valuation method other than fair market value, please specify the method used
If an asset was sold and is included only because it generated income, the value should be "None."

BLOCK C — Type of Income

BLOCK D — Amount of Income

For IRA's and retirement plans that are *not* self-directed, you may write in "NA" for income

BLOCK E — Transaction

Indicate if asset was purchased (P), sold (S), or exchanged (E) in reporting year

	BLOCK A	A None	B $1 – $1,000	C $1,001 – $15,000	$15,001 – $50,000	E $50,001 – $100,000	F $100,001 – $250,000	G $250,001 – $500,000	H $500,001 – $1,000,000	I $1,000,001 – $5,000,000	J $5,000,001 – $25,000,000	K $25,000,001 – $50,000,000	L Over $50,000,000	BLOCK C: DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Type of Income (Specify For Example: Partnership Income or Farm Income)	BLOCK D: I None	II $1 – $200	III $201 – $1,000	IV $1,001 – $2,500	V $2,501 – $5,000	VI $5,001 – $15,000	VII $15,001 – $50,000	VIII $50,001 – $100,000	IX $100,001 – $1,000,000	X $1,000,001 – $5,000,000	XI Over $5,000,000	BLOCK E
SP.																															
DC.	*Examples*			Indefinite										X							Royalties										P
JT						X																									S, E
	1st Bank of Paducah, KY accounts						X									X										X					
JT	530 W. 6th ST., ERIE PA.						X							X									X								

For additional assets and unearned income, use next page.

1087

Name PHILIP S. ENGLISH | Page 4 of 5

SCHEDULE V — LIABILITIES

Report liabilities of over $10,000 owed to any one creditor ***at any time*** during the reporting period by you, your spouse, or dependent child. Mark the highest amount owed during the year. **Exclude:** Any mortgage on your personal residence (unless it is rented out), loans secured by automobiles, household furniture, or appliances, and liabilities owed to a spouse, or the child, parent, or sibling of you or your spouse. Report ***revolving charge accounts*** only if the balance at the end of the reporting period exceeded $10,000.

SP, DC, JT	Creditor	Type of Liability	Amount of Liability									
			B $10,001–$15,000	C $15,001–$50,000	D $50,001–$100,000	E $100,001–$250,000	F $250,001–$500,000	G $500,001–$1,000,000	H $1,000,001–$5,000,000	I $5,000,001–$25,000,000	J $25,000,001–$50,000,000	K Over $50,000,000
	Example First Bank of Wilmington, Delaware	Mortgage on 123 Main St., Dover, Del				X						
JT	BANK UNITED OF TEXAS FSB (HOUSTON TX)	MORTGAGE ON 530 W. 6TH ST.				X						
	CITIBANK (SIOUX FALLS, S.D.)	MASTERCARD ACCOUNT	X									
JT	MELLON BANK, 1128 STATE ST., ERIE, PA.	HOME EQUITY LOAN		X								

SCHEDULE VI — GIFTS

Report the source, a brief description, and the value of all gifts totalling more than $250 received by you, your spouse, or a dependent child from any source during the year.

Exclude: Gifts from relatives, gifts of personal hospitality of an individual, local meals, and gifts to a spouse or dependent child that are totally independent of his or her relationship to you. Gifts with a value of $100 or less need not be added towards the $250 disclosure threshold.

Note: The gift rule (House Rule 51) prohibits gifts except as specifically provided in the rule.

Source	Description	Value
Example: Mr. Joseph H. Smith, Anytown, Anystate	Silver Platter (determination on personal friendship received from Committee on Standards)	$270

Use additional sheets if more space is required.

Name PHILIP S. ENGLISH | Page 5 of 5

SCHEDULE VII —TRAVEL PAYMENTS AND REIMBURSEMENTS

Identify the source and list travel itinerary, dates, and nature of expenses provided for travel and travel-related expenses totalling more than $250 received by you, your spouse, or a dependent child during the reporting period. Indicate whether a family member accompanied the traveler at the sponsor's expense, and the amount of time, if any, that was not at the sponsor's expense. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor.

Exclude: Travel-related expenses provided by federal, state, and local governments, or by a foreign government required to be separately reported under the Foreign Gifts and Decorations Act (5 U.S.C. § 7342); travel paid for by a Federal political committee; travel provided to a spouse or dependent child that is totally independent of his or her relationship to you.

Source	Date(s)	Point of Departure—Destination—Point of Return	Lodging? (Y/N)	Food? (Y/N)	Was a Family Member Included? (Y/N)	Any time not at sponsor's expense
Examples: Chicago Chamber of Commerce	Mar. 2	Wash., D.C. —Chicago—Wash., D.C.	N	N	N	N
Examples: Roycroft Corporation	Aug. 6–13	Wash., D.C. —Los Angeles—Cleveland	Y	Y	Y	4 Days
MAIN STREET COALITION	JULY 26	NEW YORK, N.Y. - WASH., DC	N	N	N	N
ASIA PACIFIC EXCHANGE FOUNDATION (CULTURAL EXCHANGE)	MAY 23 - JUNE 2	WASHINGTON, D.C. - CHINA - HONG KONG - WASH. D.C.	Y	Y	N	N

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UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1997

FORM A
For use by Members, officers, and employees

RECEIVED
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JOHN ERIC ENSIGN
(Full Name)

7515 COLEY AVENUE, LAS VEGAS, NV 89117 (702) 225-5965
(Mailing Address) (Daytime Telephone)

MAY 08 1998
(Office Use Only)

(4)

Filer Status	☑ Member of the U.S. House of Representatives	State: NV District: 1	☐ Officer or Employee	Employing Office:	A *$200 penalty* shall be assessed against anyone who files more than 30 days late.
Report Type	☑ Annual (May 15)	☐ Amendment	☐ Termination	Termination Date:	

PRELIMINARY INFORMATION — ANSWER EACH OF THESE QUESTIONS

I. Did you or your spouse have "earned" income (e.g. salaries or fees) of $200 or more from any source in the reporting period? **If yes, complete and attach Schedule I.** — Yes ☐ No ☑

II. Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? **If yes, complete and attach Schedule II.** — Yes ☐ No ☑

III. Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? **If yes, complete and attach Schedule III.** — Yes ☑ No ☐

IV. Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset worth more than $1,000 in the reporting period? **If yes, complete and attach Schedule IV.** — Yes ☐ No ☑

V. Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? **If yes, complete and attach Schedule V.** — Yes ☐ No ☑

VI. Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $250 and not otherwise exempt)? **If yes, complete and attach Schedule VI.** — Yes ☐ No ☑

VII. Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $250 from one source)? **If yes, complete and attach Schedule VII.** — Yes ☑ No ☐

VIII. Did you hold any reportable positions on or before the date of filing in the current calendar year? **If yes, complete and attach Schedule VIII.** — Yes ☐ No ☑

IX. Did you have any reportable agreement or arrangement with an outside entity? **If yes, complete and attach Schedule IX.** — Yes ☐ No ☑

Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION — ANSWER EACH OF THESE QUESTIONS

TRUSTS—Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child? — Yes ☐ No ☑

EXEMPTION– Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption? — Yes ☐ No ☑

CERTIFICATION — THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended. The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct or its designee. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil penalties and criminal sanctions (*See* 5 U.S.C. app. 4, §104 and 18 U.S.C. §1001)

SIGNATURE OF REPORTING INDIVIDUAL: John E. Ensign

DATE (Month/Day/Year): 5/8/98

1090

Name JOHN ENSIGN | Page 2 of 4

SCHEDULE III — ASSETS AND "UNEARNED" INCOME

BLOCK A — Asset and/or Income Source

Identify (a) each asset held for investment or production of income with a fair market value exceeding $1,000 at the end of the reporting year, and (b) any other asset or source of income which generated more than $200 in "unearned" income during the year. For rental property or land, provide an address. Provide full names of any mutual funds. For an IRA or retirement plan that is *self-directed*, list the underlying assets worth more than $1,000. For an IRA or retirement plan that is not selfdirected, name the institution holding the account.

Exclude: Your personal residence(s) (unless there is rental income), any debt owed to you by your spouse, or by your or your spouse's child, parent, or sibling, any deposits totalling $5,000 or less in personal savings accounts, any financial interests in or income derived from U.S. Government retirement programs.

If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC) or is jointly held (JT), in the optional column on the far left.

SP		SP	Mega Corp. Stock
DC	*Examples:*		Simon & Schuster
JT			1st Bank of Paducah, KY accounts

BLOCK B — Value of Asset

at close of reporting year. If you use a valuation method other than fair market value, please specify the method used. If an asset was sold and is included only because it generated income, the value should be "None."

A	B	C	E	F	G	H	I	J	K	L
None	$1 – $1,000	$1,001 – $15,000	$15,001 – $50,000	$50,001 – $100,000	$100,001 – $250,000	$250,001 – $500,000	$500,001 – $1,000,000	$1,000,001 – $5,000,000	$5,000,001 – $25,000,000	$25,000,001 – $50,000,000	Over $50,000,000
		Indefinite		X							
					X						

BLOCK C — Type of Income

DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Type of Income (Specify. For Example: Partnership Income or Farm Income)
X						Royalties
		X				

BLOCK D — Amount of Income

For IRA's and retirement plans that are *not* self-directed, you may write in "NA" for income.

I	II	III	IV	V	VI	VII	VIII	IX	X	XI
None	$1 – $200	$201 – $1,000	$1,001 – $2,500	$2,501 – $5,000	$5,001 – $15,000	$15,001 – $50,000	$50,001 – $100,000	$100,001 – $1,000,000	$1,000,001 – $5,000,000	Over $5,000,000
			X							
					X					

BLOCK E — Transaction

Indicate if asset was purchased (P), sold (S), or exchanged (E) in reporting year.

	A	B	C	E	F	G	H	I	J	K	L	DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Type of Income	I	II	III	IV	V	VI	VII	VIII	IX	X	XI	Transaction
JOHN E. ENSIGN, DVM & GERALD PRIBYL, DVM, CHTD - OWNERSHIP SHARE			X									X							X										
E+P PARTNERSHIP - OWNERSHIP SHARE				X														PARTNERSHIP INCOME						X					
NOTE RECEIVABLE - CHRISTOPHER YACH, DVM, CHTD, LAS VEGAS, NV							X							X													X			P
NOTE RECEIVABLE - CHRIS MILLS, LAS VEGAS NV				X										X										X						S
CHARLES SCHWAB - MONEY MKT				X										X								X								E
NATIONSBANK - CHECKING	X																				X									P

For additional assets and unearned income, use next page.

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SCHEDULE III — ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Name JOHN SENSIGN | Page 3 of 4

SP DC JT	BLOCK A Asset and/or Income Source	BLOCK B Year-End Value of Asset											BLOCK C Type of Income						BLOCK D Amount of Income										BLOCK E Transaction
		A None	B $1 – $1,000	C $1,001 – $15,000	D $15,001 – $50,000	E $50,001 – $100,000	F $100,001 – $250,000	G $250,001 – $500,000	H $500,001 – $1,000,000	I $1,000,001 – $5,000,000	J $5,000,001 – $25,000,000	K $25,000,001 – $50,000,000	L Over $50,000,000	DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Type of Income (Specify)	I None	II $1 – $200	III $201 – $1,000	IV $1,001 – $2,500	V $2,501 – $5,000	VI $5,001 – $15,000	VII $15,001 – $50,000	VIII $50,001 – $100,000	IX $100,001 – $1,000,000	X $1,000,001 – $5,000,000	XI Over $5,000,000	P S E
	CONGRESSIONAL FED CR. UNION				X										X							X								

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SCHEDULE VII —TRAVEL PAYMENTS AND REIMBURSEMENTS

Identify the source and list travel itinerary, dates, and nature of expenses provided for travel and travel-related expenses totalling more than $250 received by you, your spouse, or a dependent child during the reporting period. Indicate whether a family member accompanied the traveler at the sponsor's expense, and the amount of time, if any, that was not at the sponsor s expense. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor.

Exclude: Travel-related expenses provided by federal, state, and local governments, or by a foreign government required to be separately reported under the Foreign Gifts and Decorations Act (5 U.S.C § 7342); travel paid for by a Federal political committee; travel provided to a spouse or dependent child that is totally independent of his or her relationship to you

Source	Date(s)	Point of Departure—Destination—Point of Return	Lodging? (Y/N)	Food? (Y/N)	Was a Family Member Included? (Y/N)	Any time not at sponsor's expense
Examples Chicago Chamber of Commerce	Mar 2	Wash . D C —Chicago—Wash . D C	N	N	N	N
Roycroft Corporation	Aug 6–13	Wash . D C —Los Angeles—Cleveland	Y	Y	Y	4 Days
ASIA PACIFIC EXCHANGE FOUNDATION (USIA APPROVED CULTURAL EXCHANGE)	MAY 23-JUN 2	WASH., DC - CHINA - HONGKONG - WASH, DC.	Y	Y	N	N

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UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1997

FORM A
For use by Members, officers, and employees

99 APR 29 PM 3:53

Anna Georges Eshoo
(Full Name)

40 Isabella Avenue - Atherton - California - 94027
(Mailing Address) Daytime Telephone

650 - 323 - 2984

(9)

HAND DELIVERED
(Office Use Only)

Filer Status	☒ Member of the U S House of Representatives	State District	☐ Officer or Employee	Employing Office
Report Type	☐ Annual (May 15)	☐ Amendment	☐ Termination	Termination Date

A *$200 penalty* shall be assessed against anyone who files more than 30 days late.

PRELIMINARY INFORMATION — ANSWER EACH OF THESE QUESTIONS

I Did you or your spouse have "earned" income (e g , salaries or fees) of $200 or more from any source in the reporting period?
If yes, complete and attach Schedule I. Yes ☒ No ☐

II Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period?
If yes, complete and attach Schedule II. Yes ☐ No ☒

III Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period?
If yes, complete and attach Schedule III. Yes ☒ No ☐

IV Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset worth more than $1,000 in the reporting period?
If yes, complete and attach Schedule IV. Yes ☒ No ☐

V Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period?
If yes, complete and attach Schedule V. Yes ☒ No ☐

VI Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i e , aggregating more than $250 and not otherwise exempt)?
If yes, complete and attach Schedule VI. Yes ☐ No ☒

VII Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $250 from one source)?
If yes, complete and attach Schedule VII. Yes ☒ No ☐

VIII Did you hold any reportable positions on or before the date of filing in the current calendar year?
If yes, complete and attach Schedule VIII. Yes ☐ No ☒

IX Did you have any reportable agreement or arrangement with an outside entity?
If yes, complete and attach Schedule IX. Yes ☐ No ☒

Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION — ANSWER EACH OF THESE QUESTIONS

TRUSTS—Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child? Yes ☐ No ☒

EXEMPTION—Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption? Yes ☐ No ☒

CERTIFICATION — THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct or its designee Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil penalties and criminal sanctions (*See* 5 U S C app 4, §104 and 18 U S C §1001)

SIGNATURE OF REPORTING INDIVIDUAL Anna G. Eshoo **DATE** (Month/Day/Year) April 29 1998

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SCHEDULE I — EARNED INCOME

List the source, type, and amount of earned income from any source (other than the filer's current employment by the U.S. Government) totalling $200 or more during the preceding calendar year. For a spouse, list the source and amount of any honoraria; list only the source for other spouse earned income exceeding $1,000.

Source	Type	Amount
Examples Keene State	Approved Teaching Fee	$6,000
State of Maryland	Legislative Pension	$9,000
Civil War Roundtable (Oct 2nd)	Spouse Speech	$1,000
Ontario County Board of Education	Spouse Salary	NA
County of San Mateo California Retirement Fund	Retirement Benefit	$7,583

For payments to charity in lieu of honoraria, use Schedule II.

1095

SCHEDULE II — PAYMENTS IN LIEU OF HONORARIA MADE TO CHARITY

List the source, activity (i e , speech, appearance, or article), date, and amount of any payment made by the sponsor of an event to a charitable organization in lieu of an honorarium A separate confidential list of charities receiving such payments must be filed directly with the Committee on Standards of Official Conduct. An envelope for transmitting the list is included in each Member's filing package

Source	Activity	Date	Amount
Examples Association of American Associations, Wash , D C	Speech	Feb 2, 1997	$2,000
XYZ Magazine	Article	Aug 13, 1997	$500
- None -			

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Name Ana Georges Eshoo | Page 3 of 8

SCHEDULE III — ASSETS AND "UNEARNED" INCOME

BLOCK A — Asset and/or Income Source

Identify (a) each asset held for investment or production of income with a fair market value exceeding $1,000 at the end of the reporting year, and (b) any other asset or source of income which generated more than $200 in "unearned" income during the year. For rental property or land, provide an address. Provide full names of any mutual funds. For an IRA or retirement plan that is *self-directed*, list the underlying assets worth more than $1,000. For an IRA or retirement plan that is not selfdirected, name the institution holding the account.

Exclude: Your personal residence(s) (unless there is rental income), any debt owed to you by your spouse, or by your or your spouse's child, parent, or sibling, any deposits totalling $5,000 or less in personal savings accounts, any financial interests in or income derived from U.S. Government retirement programs.

If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC) or is jointly held (JT), in the optional column on the far left.

BLOCK B — Value of Asset (at close of reporting year. If you use a valuation method other than fair market value, please specify the method used. If an asset was sold and is included only because it generated income, the value should be "None.")

BLOCK C — Type of Income

BLOCK D — Amount of Income (For IRA's and retirement plans that are *not* self-directed, you may write in "NA" for income)

BLOCK E — Transaction (Indicate if asset was purchased (P), sold (S), or exchanged (E) in reporting year)

	BLOCK A	BLOCK B												BLOCK C							BLOCK D										BLOCK E
		A	B	C		E	F	G	H	I	J	K	L								I	II	III	IV	V	VI	VII	VIII	IX	X	XI	
		None	$1 – $1,000	$1,001 – $15,000	$15,001 – $50,000	$50,001 – $100,000	$100,001 – $250,000	$250,001 – $500,000	$500,001 – $1,000,000	$1,000,001 – $5,000,000	$5,000,001 – $25,000,000	$25,000,001 – $50,000,000	Over $50,000,000	DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Type of Income (Specify For Example: Partnership Income or Farm Income)	None	$1 – $200	$201 – $1,000	$1,001 – $2,500	$2,501 – $5,000	$5,001 – $15,000	$15,001 – $50,000	$50,001 – $100,000	$100,001 – $1,000,000	$1,000,001 – $5,000,000	Over $5,000,000	P, S, E
SP																															
DC	*Examples*													X																	P
JT				Indefinite												X				Royalties											
	The Hartford Grp/Deferred Comp Plan			X			X							Deferred Compensation Plan												X					N/A
	County of San Mateo/Retirement			X										Retirement Plan											X						N/A
	Great Western Bank/Checking			X										None									None								N/A
	Great Western Bank/Savings			X												X						X									N/A
	San Mateo Credit Union		X													X					X										N/A
	Penn Mutual Life Ins. Co.		X													X						X									N/A

For additional assets and unearned income, use next page.

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SCHEDULE III — ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Name Anna Georges Eshoo | Page 4 of 8

BLOCK A: Asset and/or Income Source	BLOCK B: Year-End Value of Asset											BLOCK C: Type of Income							BLOCK D: Amount of Income										BLOCK F: Transaction
SP / DC / JT	A None	B $1 – $1,000	C $1,001 – $15,000	D $15,001 – $50,000	E $50,001 – $100,000	F $100,001 – $250,000	G $250,001 – $500,000	H $500,001 – $1,000,000	I $1,000,001 – $5,000,000	J $5,000,001 – $25,000,000	K $25,000,001 – $50,000,000	L Over $50,000,000	DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Type of Income (Specify)	I None	II $1 – $200	III $201 – $1,000	IV $1,001 – $2,500	V $2,501 – $5,000	VI $5,001 – $15,000	VII $15,001 – $50,000	VIII $50,001 – $100,000	IX $100,001 – $1,000,000	X $1,000,001 – $5,000,000	XI Over $5,000,000	P S E
Wright-Patman Credit Union/Checking		X													X						X									
Wright-Patman Credit Union/Svgs		X													X						X									
Riggs Bank		X													X						X									
Paine Webber																														
Money Market Fund			X												X							X								
Mutual Fund			X												X							X								
IRA															X						X									
Securities																														
Deere & Co.			X										X								X									
Earnhardt Co.			X										X								X									

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Name Anna Georges Eshoo | Page 5 of 8

SCHEDULE IV — TRANSACTIONS

Report any purchase, sale, or exchange by you, your spouse, or dependent child during the reporting year of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child, or the purchase or sale of your personal residence, unless it is rented out.

SP, DC, JT	Asset	Type of Transaction: PURCHASE	SALE	EXCHANGE	Date (MO/DAY/YR)	Amount of Transaction: B ($1,001–$15,000)	C ($15,001–$50,000)	D ($50,001–$100,000)	E ($100,001–$250,000)	F ($250,001–$500,000)	G ($500,001–$1,000,000)	H ($1,000,001–$5,000,000)	I ($5,000,001–$25,000,000)	J ($25,000,001–$50,000,000)	K (Over $50,000,000)
SP	*Example* Mega Corporation Common Stock	X			10 12 97		X								
	Ford Motor Company		X		1-3-97	X									
	International Flavors		X		1-3-97	X									
	Stone Container Corp.		X		1-3-97	X									

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Name Anna Georges Eshoo | Page 6 of 8

SCHEDULE V — LIABILITIES

Report liabilities of over $10,000 owed to any one creditor ***at any time*** during the reporting period by you, your spouse, or dependent child. Mark the highest amount owed during the year. **Exclude:** Any mortgage on your personal residence (unless it is rented out), loans secured by automobiles, household furniture or appliances, and liabilities owed to a spouse or the child, parent, or sibling of you or your spouse. Report ***revolving charge accounts*** only if the balance at the end of the reporting period exceeded $10,000.

SP, DC, JT	Creditor	Type of Liability	Amount of Liability									
			B $10,001–$15,000	C $15,001–$50,000	D $50,001–$100,000	E $100,001–$250,000	F $250,001–$500,000	G $500,001–$1,000,000	H $1,000,001–$5,000,000	I $5,000,001–$25,000,000	J $25,000,001–$50,000,000	K Over $50,000,000
	Example First Bank of Wilmington, Delaware	Mortgage on 123 Main St., Dover, Del				x						
	Glendale Federal Bank Dept. 5007 - Walnut - Calif. 91795-5007	Mortgage on my home at 40 Isabella Ave - Atherton - Calif.					X					
	Sumitomo Bank of California P.O. Box 54499 - Los Angeles - California 90054-0499	Equity Line of Credit on Home Mortgage		X								

SCHEDULE VI — GIFTS

Report the source, a brief description, and the value of all gifts totalling more than $250 received by you, your spouse, or a dependent child from any source during the year.

Exclude: Gifts from relatives, gifts of personal hospitality of an individual, local meals, and gifts to a spouse or dependent child that are totally independent of his or her relationship to you. Gifts with a value of $100 or less need not be added towards the $250 disclosure threshold.

Note: The gift rule (House Rule 51) prohibits gifts except as specifically provided in the rule.

Source	Description	Value
Example Mr. Joseph H. Smith, Anytown, Anystate	Silver Platter (determination on personal friendship received from Committee on Standards)	$270
	- None -	

Use additional sheets if more space is required.

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SCHEDULE VII —TRAVEL PAYMENTS AND REIMBURSEMENTS

Identify the source and list travel itinerary, dates, and nature of expenses provided for travel and travel-related expenses totalling more than $250 received by you, your spouse, or a dependent child during the reporting period. Indicate whether a family member accompanied the traveler at the sponsor's expense, and the amount of time, if any, that was not at the sponsor's expense. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor.

Exclude: Travel-related expenses provided by federal, state, and local governments, or by a foreign government required to be separately reported under the Foreign Gifts and Decorations Act (5 U.S.C. § 7342), travel paid for by a Federal political committee, travel provided to a spouse or dependent child that is totally independent of his or her relationship to you.

Source	Date(s)	Point of Departure—Destination—Point of Return	Lodging? (Y/N)	Food? (Y/N)	Was a Family Member Included? (Y/N)	Any time not at sponsor's expense
Examples: Chicago Chamber of Commerce	Mar. 2	Wash. D.C.—Chicago—Wash., D.C.	N	N	N	N
Examples: Roycroft Corporation	Aug. 6-13	Wash., D.C.—Los Angeles—Cleveland	Y	Y	Y	4 Days
The Aspen Institute Conference / Ensuring Childrens' Future West Palm Beach - Florida	Feb. 14-17 1997	Anna Eshoo D.C.-West Palm Beach-return to D.C. $1225.82	Y	Y	Yes my son, Paul Eshoo	None
		Paul Eshoo Transport $1710.82 SFO-West Palm Beach-SFO	$1122	$1134		
		Misc./Grand Transport $100.00				
The Aspen Institute Bipartisan Congressional Retreat Hershey - Pennsylvania	March 7-9 1997	Wash, D.C.-Hershey-Wash. D.C. via Amtrak $106.00	Y $23.00 (food)	Y $106.00 (total lodging)	No	None
Chicago Mercantile Exchange Chicago Illinois	July 28 1997	Wash, D.C.-Chicago-Wash, D.C.; Grants Transport approx $50.00; $967.21 transportation	Y $414.16	N	No	Yes-- July 25-26-27

SCHEDULE VIII — POSITIONS

Report all positions, compensated or uncompensated, held during the current calendar year as an officer, director, trustee of an organization, partner, proprietor, representative, employee, or consultant of any corporation, firm, partnership, or other business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States.

Exclude: Positions held in any religious, social, fraternal, or political entities; positions solely of an honorary nature; and positions listed on Schedule I.

Position	Name of Organization
	- None -

SCHEDULE IX — AGREEMENTS

Identify the date, parties to, and general terms of any agreement or arrangement with respect to: future employment; a leave of absence during the period of government service; continuation or deferral of payments by a former or current employer other than the U.S. Government; or continuing participation in an employee welfare or benefit plan maintained by a former employer.

Date	Parties To	Terms of Agreement
	- None -	

GPO: 1998-46-760 (mac)

Use additional sheets if more space is required.

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UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1997

Form A
For use by Members, officers, and employees

HAND DELIVERED
(Office Use Only)

Bobby R Etheridge
(Full Name)

Route 6 Box 594
(Mailing Address)

Lillington NC 27546

Daytime Telephone 919 715-1277

Filer Status

[X] Member of the U S House of Representatives — State NC, District 02

[ ] Officer or Employee — Employing Office

Report Type

[X] Annual (May 15)

[ ] Amendment

[ ] Termination — Termination Date

A $200 penalty shall be assessed against anyone who files more than 30 days late.

PRELIMINARY INFORMATION -- ANSWER EACH OF THESE QUESTIONS

I Did you or your spouse have "earned" income (e g , salaries or fees) of $200 or more from any source in the reporting period?
If yes, complete and attach Schedule I. Yes [X] No [ ]

II Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period?
If yes, complete and attach Schedule II. Yes [X] No [ ]

III Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period?
If yes, complete and attach Schedule III. Yes [X] No [ ]

IV Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset worth more than $1,000 in the reporting period?
If yes, complete and attach Schedule IV. Yes [X] No [ ]

V Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period?
If yes, complete and attach Schedule V. Yes [X] No [ ]

VI Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i e , aggregating more than $250 and not otherwise exempt)?
If yes, complete and attach Schedule VI. Yes [ ] No [X]

VII Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $250 from one source)?
If yes, complete and attach Schedule VII. Yes [X] No [ ]

VIII Did you hold any reportable positions on or before the date of filing in the current calendar year?
If yes, complete and attach Schedule VIII. Yes [X] No [ ]

IX Did you have any reportable agreement or arrangement with an outside entity?
If yes, complete and attach Schedule IX. Yes [ ] No [X]

Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION -- ANSWER EACH OF THESE QUESTIONS

TRUSTS- Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child? (See Instructions, pages 10-11) Yes [ ] No [X]

EXEMPTION Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption? (See Instructions, page 11) Yes [ ] No [X]

CERTIFICATION -- THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct or its designee Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil penalties and criminal sanctions (See 5 U S C app 4, 104 and 18 U S C 1001)

SIGNATURE OF REPORTING INDIVIDUAL Bob Etheridge

DATE (Month/Day/Year) 5/13/98

1103

SCHEDULE I -- EARNED INCOME

List the source, type, and amount of earned income from any source (other than the filer's current employment by the U.S. Government) totalling $200 or more during the preceding calendar year. For a spouse, list the source and amount of any honoraria, list only the source for other spouse earned income exceeding $1,000. For further information, see instructions, pages 12-13.

	Source	Type	Amount
Examples	Keene State	Approved Teaching Fee	$10,000
	State of Maryland	Legislative Pension	$9,000
	Civil War Roundtable (Oct. 2nd)	Spouse Speech	$1,000
	Ontario County Board of Education	Spouse Salary	NA
	Harnett Board of Education	Spouse Salary	NA
	State of North Carolina	State/Legislative Pension	$9,226.44

For payments to charity in lieu of honoraria, use Schedule II.

SCHEDULE II -- PAYMENTS IN LIEU OF HONORARIA MADE TO CHARITY

List the source, activity (i e , speech, appearance, or article), date, and amount of any payment made by the sponsor of an event to a charitable organization in lieu of an honorarium
A separate confidential list of charities receiving such payments must be filed directly with the Committe on Standards of Official Conduct An envelope for transmitting the list is included in each Member's filing package. For further information, see Instructions, pages 13-14

	Source	Activity	Date	Amount
Examples	Association of American Associations, Wash , D C	Speech	Feb 2, 1994	$2,000
	XYZ Magazine	Article	Aug 13, 1994	$500
	The Tobacco Institute	speech	Dec 17, 1997	$1,000 00

SCHEDULE IV -- TRANSACTIONS

Report any purchase, sale, or exchange by you, your spouse, or dependent child during the reporting year of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child or the purchase or sale of your personal residence, unless it is rented out. For further information, see Instructions, pages 20-21.

SP,DC,JT	Asset	Type of Transaction	Date	Amount of Transaction
	Example Mega Corporation Common Stock	Purchase	10/12/94	$15,001 - $50,000
JT	Rental Property, Angier, NC	Sold	2/1/97	$50,001 - $100,000

SCHEDULE V -- LIABILITIES

Report liabilities of over $10,000 owed to any one creditor ***at any time*** during the reporting period by you, your spouse, or dependent child. Mark the highest amount owed during the year.
Exclude: Any mortgage on your personal residence (unless it is rented out), loans secured by automobiles, household furniture, or appliances, and liabilities owed to a spouse, or the child, parent, or sibling of you or your spouse. Report ***revolving charge accounts*** only if the balance at the end of the reporting period exceeded $10,000. For further information, see instructions, pages 21-22.

SP,DC,JT	Creditor	Type of Liability	Amount of Liability
Example	First Bank of Wilmington, Delaware	Mortgage on 123 Main St., Dover, Del	$100,001 - $250,000
JT	Triangle Bank, Dunn NC	Farm & Commercial Property	$15,001 - $50,000

1109

SCHEDULE IV -- TRANSACTIONS

Report any purchase, sale, or exchange by you, your spouse, or dependent child during the reporting year of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child, or the purchase or sale of your personal residence, unless it is rented out. For further information, see Instructions, pages 20-21.

SP,DC,JT	Asset	Type of Transaction	Date	Amount of Transaction
	Example Mega Corporation Common Stock	Purchase	10/12/94	$15,001 - $50,000
JT	Rental Property, Angier, NC	Sold	2/1/97	$50,001 - $100,000

SCHEDULE V -- LIABILITIES

Report liabilities of over $10,000 owed to any one creditor ***at any time*** during the reporting period by you, your spouse, or dependent child. Mark the highest amount owed during the year.
Exclude: Any mortgage on your personal residence (unless it is rented out), loans secured by automobiles, household furniture, or appliances, and liabilities owed to a spouse, or the child, parent, or sibling of you or your spouse. Report ***revolving charge accounts*** only if the balance at the end of the reporting period exceeded $10,000. For further information, see Instructions, pages 21-22.

SP,DC,JT	Creditor	Type of Liability	Amount of Liability
	Example First Bank of Wilmington, Delaware	Mortgage on 123 Main St., Dover, Del	$100,001 - $250,000
JT	Triangle Bank, Dunn NC	Farm & Commercial Property	$15,001 - $50,000

SCHEDULE VI -- GIFTS

Report the source, a brief description, and the value of all gifts totalling more than $250 received by you, your spouse, or a dependent child from any source during the year

Exclude: Gifts from relatives, gifts of personal hospitality of an individual, local meals, and gifts to a spouse or dependent child that are totally independent of his or her relationship to you. Gifts with a value of $100 or less need not be added towards the $250 disclosure threshold

Note: The gift rule (House Rule 52 in the 104th Congress, renumbered as House Rule 51 of the 105th Congress) prohibits gifts except as specifically provided in the rule

For further information, see Instructions, pages 22-24

Source	Description	Value
Example Mr. Joseph H. Smith, Anytown, Anystate	Silver Platter (waiver received from Committee on Standards)	$270

SCHEDULE VII -- TRAVEL PAYMENTS AND REIMBURSEMENTS

Identify the source and list travel itinerary, dates, and nature of expenses provided for travel and travel-related expenses totalling more than $250 received by you, your spouse or a dependent child during the reporting period. Indicate whether a family member accompanied the traveler at the sponsor's expense, and the amount of time, if any, that was not at the sponsor's expense. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor.
Exclude: Travel-related expenses provided by federal, state and local governments, or by a foreign government required to be separately reported under the Foreign Gifts and Decorations Act (5 U.S.C. 7342), travel paid for by a Federal political committee, travel provided to a spouse or dependent child that is totally independent of his or her relationship to you. For further information, see Instructions, pages 24-26.

Source	Date(s)	Point of Departure--Destination--Point of Return	Lodging? (Y/N)	Food? (Y/N)	Was a Family Member Included? (Y/N)	Any time not at sponsor's expense
Examples Chicago Chamber of Commerce	Mar 2	Wash., D.C.-Chicago-Wash., D.C.	N	N	N	N
Mega Corporation	Aug 6-13	Wash., D.C.-Los Angeles-Cleveland	Y	Y	Y	4 Days
Aspen Institute	March 7-9	Wash., D.C.-Hershey-Wash., D.C.	Y	Y	Y	N
American Israel Education Foundation	Aug. 2-10	Raleigh-Israel-Raleigh	Y	Y	Y	N
The Tobacco Institute	Nov. 11-23	Raleigh-Palm Beach-Raleigh	Y	Y	Y	N

SCHEDULE VIII -- POSITIONS

Report all positions, compensated or uncompensated, held during the current calendar year as an officer, director, trustee of an organization, partner, proprietor, representative, employee, or consultant of any corporation, firm, partnership, or other business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States. For further information, see Instructions, page 26.

Exclude: Positions held in any religious, social, fraternal, or political entities, positions solely of an honorary nature, and positions listed on Schedule I.

Position	Organization
Advisory Board	Ochoneeche Boy Scout Council

SCHEDULE IX -- AGREEMENTS

Identify the date, parties to, and general terms of any agreement or arrangement with respect to future employment, a leave of absence during the period of government service, continuation or deferral of payments by a former or current employer other than the U S Government, or continuing participation in an employee welfare or benefit plan maintained by a former employer. For further information, see Instructions, pages 26-27

Date	Parties To	Terms of Agreement

BOB ETHERIDGE
2D DISTRICT, NORTH CAROLINA

COMMITTEE ON AGRICULTURE
SUBCOMMITTEES
RISK MANAGEMENT AND SPECIALTY CROPS
GENERAL FARM COMMODITIES

COMMITTEE ON SCIENCE
SUBCOMMITTEE
BASIC RESEARCH

NEW MEMBER WHIP

RECEIVED
98 JUN -5 PM 3:15

HAND DELIVERED

1641 LONGWORTH BUILDING
WASHINGTON, DC 20515
(202) 225-4531

DISTRICT OFFICES

SUITE 301
3310 CROASDAILE DRIVE
DURHAM, NC 27705
(919) 383-7548

607 NORTH 1ST STREET
LILLINGTON, NC 27546
(910) 814-0335

Congress of the United States

House of Representatives

Washington, DC 20515

June 5, 1998

5

MC

The Honorable Robin H. Carle
The Clerk of the House
U.S. House of Representatives
Legislative Resource Center
B-106 Cannon House Office Building
Washington, D.C. 20515

Dear Ms. Carle:

Please find enclosed an original and two copies of the amended schedules pertaining to my Financial Disclosure Statement for Calendar Year 1997. The following changes have been made pursuant to your examination:

Cover Sheet for Form A
- Amendment checked.

Schedule III – Assets and "Unearned" Income
- Identity of person whose note I am holding was added.
- Disclosure of Triangle Bank Stock which was omitted in error.

Schedule VII – Travel Payments and Reimbursements
- Trip sponsored by Tobacco Institute was reported lasting from Nov. 11-23; This was a typographical error. Trip sponsored by Tobacco Institute was corrected to reflect Nov. 21-23.

If you have any questions, please contact me at your earliest convenience. Thank you for your attention in this matter.

Sincerely,

Bob Etheridge
Member of Congress

BE:kw

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1997

Form A
For use by Members, officers, and employees

RECEIVED
98 JUN -5 PM 3:15
OFFICE OF THE CLERK
HOUSE OF REPRESENTATIVES

HAND DELIVERED
(Office Use Only)

Bobby R Etheridge
(Full Name)

Route 6 Box 594
(Mailing Address)

Daytime Telephone

Lillington NC 27546 919 715-1277

Filer Status	[X]	Member of the U S House of Representatives	State NC District 02	[ ]	Officer or Employee	Employing Office
Report Type	[ ]	Annual (May 15)	[X]	Amendment	[ ]	Termination Date: Termination

A $200 penalty shall be assessed against anyone who files more than 30 days late.

PRELIMINARY INFORMATION -- ANSWER EACH OF THESE QUESTIONS

I Did you or your spouse have "earned" income (e g., salaries or fees) of $200 or more from any source in the reporting period? Yes [X] No [ ]
If yes, complete and attach Schedule I.

II Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? Yes [X] No [ ]
If yes, complete and attach Schedule II.

III Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? Yes [X] No [ ]
If yes, complete and attach Schedule III.

IV Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset worth more than $1,000 in the reporting period? Yes [X] No [ ]
If yes, complete and attach Schedule IV.

V Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? Yes [X] No [ ]
If yes, complete and attach Schedule V.

VI Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $250 and not otherwise exempt)? Yes [ ] No [X]
If yes, complete and attach Schedule VI.

VII Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $250 from one source)? Yes [X] No [ ]
If yes, complete and attach Schedule VII.

VIII Did you hold any reportable positions on or before the date of filing in the current calendar year? Yes [X] No [ ]
If yes, complete and attach Schedule VIII.

IX Did you have any reportable agreement or arrangement with an outside entity? Yes [ ] No [X]
If yes, complete and attach Schedule IX.

Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION -- ANSWER EACH OF THESE QUESTIONS

TRUSTS - Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child? (See Instructions, pages 10-11.) Yes [ ] No [X]

EXEMPTION Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption? (See Instructions, page 11.) Yes [ ] No [X]

CERTIFICATION -- THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended. The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct or its designee. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil penalties and criminal sanctions (See 5 U S C. app. 4 104 and 18 U S C 1001)

SIGNATURE OF REPORTING INDIVIDUAL

DATE (Month/Day/Year) 6-4-98

1115

SCHEDULE III -- ASSETS AND "UNEARNED" INCOME

	BLOCK A **Asset and/or Income Source** Identify (a) each asset held for investment or production of income with a fair market value exceeding $1,000 at the end of the reporting year, and (b) any other asset or source of income which generated more than $200 in "unearned" income during the year. For rental property or land, provide an address. Provide full names of any mutual funds. For an IRA or retirement plan that is *self-directed*, list the underlying assets worth more than $1,000. For an IRA or retirement plan that is *not* self-directed, name the institution holding the account. **Exclude**: Your personal residence(s) (unless there is rental income), any debt owed to you by your spouse, or by your or your spouse's child, parent, or sibling; any deposits totalling $5,000 or less in personal savings accounts; any financial interests in or income derived from U.S. Government retirement programs. If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC) or is jointly held (JT), in the optional column on the far left. For further information, see Instructions, pages 14-20	BLOCK B **Value of Asset** at close of reporting year If you use a valuation method other than fair market value, please specify the method used If an asset was sold and is included only because it generated income, the value should be "None."	BLOCK C **Type of Income** If other than one of the listed categories, specify the type of income by writing a brief description in this block	BLOCK D **Amount of Income** For IRA's and retirement plans that are *not* self-directed, you may write in "NA" for income	BLOCK E **Transaction** Indicate if asset was purchased(P), sold(S), or exchanged(E) in reporting year
SP DC, *Examples* JT	SP Mega Corp. Stock 123 Main St., Dover, Del 1st Bank of Paducah, KY accounts	$15,001 - $50,000 $250,001 - $500,000 $50,001 - $100,000	Dividends Rent Interest	$201 - $1,000 $1,001 - $2,500 $5,001 - $15,000	P
	Centura Bank	$1,001 - $15,000	Dividends	$1 - $200	NA
	Carolina Power & Light Co	$1,001 - $15,000	Dividends	$201 - $1,000	NA
	Openheimer Equity Income Fund	$1,001 - $15,000	Dividends	$1 - $200	NA
	Dean Witter Money Market Trust	$1,001 - $15,000	Dividends	$1 - $200	NA
	IRA (Triangle Bank Stock)	$1,001 - $15,000	None	None	NA
JT	Farm - Rt. 1, Broadway, N.C.	$100,001 - $250,000	Rent	$2,501 - $5,000	NA
JT	Commercial Property, Lillington East McNeil Street	$15,001 - $50,000	None	None	NA

1116

SCHEDULE III -- ASSETS AND "UNEARNED" INCOME

SP	NC State Retirement Pension	None	None	None	NA
	NC State Deferred Compensation Plan (401 K)	$50,001 - $100,000	None	None	NA
JT	Rental Property, Lillington, NC (house)	$15,001 - $50,000	Rent	$2,501 - $5,000	NA
SP	NC State Deferred Compensation (401 K)	None	None	None	NA
	Individual Note - Joe and Susanne Langley	$15,001 - $50,000	Interest	$2,501 - $5,000	NA
	Triangle Bank (Stock)	$1 - $1,000	Dividends	$1 - $200	NA

SCHEDULE VII -- TRAVEL PAYMENTS AND REIMBURSEMENTS

Identify the source and list travel itinerary, dates, and nature of expenses provided for travel and travel-related expenses totalling more than $250 received by **you**, your spouse, or a dependent child during the reporting period. Indicate whether a family member accompanied the traveler at the sponsor's expense, and the amount of time, if any, that was not at the sponsor's expense. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor.
Exclude: Travel-related expenses provided by federal, state and local governments, or by a foreign government required to be separately reported under the Foreign Gifts and Decorations Act (5 U.S.C. 7342), travel paid for by a Federal political committee; travel provided to a spouse or dependent child that is totally independent of his or her relationship to you. For further information, see Instructions, pages 24-26.

Source	Date(s)	Point of Departure--Destination--Point of Return	Lodging? (Y/N)	Food? (Y/N)	Was a Family Member Included? (Y/N)	Any time not at sponsor's expense
Examples Chicago Chamber of Commerce	Mar 2	Wash., D.C.-Chicago-Wash., D.C.	N	N	N	N
Mega Corporation	Aug 6-13	Wash., D.C.-Los Angeles-Cleveland	Y	Y	Y	4 Days
Aspen Institute	March 7-9	Wash., D.C.-Hershey-Wash., D.C.	Y	Y	Y	N
American Israel Education Foundation	Aug. 2-10	Raleigh-Israel-Raleigh	Y	Y	Y	N
The Tobacco Institute	Nov. 21-23	Raleigh-Palm Beach-Raleigh	Y	Y	Y	N

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1997

FORM A
For use by Members, officers, and employees

98 MAY 15 PM 3:13

Lane A. Evans
(Full Name)

2335 Rayburn HOB
(Mailing Address)

Washington, DC 20515

Daytime Telephone (202) 225-5905

(5)

HAND DELIVERED
(Office Use Only)

Filer Status
[x] Member of the U.S. House of Representatives — State Illinois, District 17
[ ] Officer or Employee — Employing Office

Report Type
[x] Annual (May 15)
[ ] Amendment
[ ] Termination — Termination Date

A *$200 penalty* shall be assessed against anyone who files more than 30 days late.

PRELIMINARY INFORMATION — ANSWER EACH OF THESE QUESTIONS

I. Did you or your spouse have "earned" income (e.g., salaries or fees) of $200 or more from any source in the reporting period? **If yes, complete and attach Schedule I.** — Yes [ ] No [x]

II. Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? **If yes, complete and attach Schedule II.** — Yes [ ] No [x]

III. Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? **If yes, complete and attach Schedule III.** — Yes [x] No [ ]

IV. Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset worth more than $1,000 in the reporting period? **If yes, complete and attach Schedule IV.** — Yes [ ] No [x]

V. Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? **If yes, complete and attach Schedule V.** — Yes [x] No [ ]

VI. Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $250 and not otherwise exempt)? **If yes, complete and attach Schedule VI.** — Yes [ ] No [x]

VII. Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $250 from one source)? **If yes, complete and attach Schedule VII.** — Yes [x] No [ ]

VIII. Did you hold any reportable positions on or before the date of filing in the current calendar year? **If yes, complete and attach Schedule VIII.** — Yes [x] No [ ]

IX. Did you have any reportable agreement or arrangement with an outside entity? **If yes, complete and attach Schedule IX.** — Yes [ ] No [x]

Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION — ANSWER EACH OF THESE QUESTIONS

TRUSTS—Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child? — Yes [ ] No [x]

EXEMPTION—Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption? — Yes [ ] No [x]

CERTIFICATION — THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended. The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct or its designee. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil penalties and criminal sanctions (*See* 5 U.S.C. app. 4, §104 and 18 U.S.C. §1001).

SIGNATURE OF REPORTING INDIVIDUAL Lane A. Evans

DATE (Month/Day/Year) May 13 1998

1119

SCHEDULE III — ASSETS AND "UNEARNED" INCOME

Name Lane A. Evans | Page 1 of 4

BLOCK A — Asset and/or Income Source

Identify (a) each asset held for investment or production of income with a fair market value exceeding $1,000 at the end of the reporting year, and (b) any other asset or source of income which generated more than $200 in "unearned" income during the year. For rental property or land, provide an address. Provide full names of any mutual funds. For an IRA or retirement plan that is *self-directed*, list the underlying assets worth more than $1,000. For an IRA or retirement plan that is not self-directed, name the institution holding the account.

Exclude: Your personal residence(s) (unless there is rental income), any debt owed to you by your spouse, or by your or your spouse's child, parent, or sibling, any deposits totalling $5,000 or less in personal savings accounts, any financial interests in or income derived from U.S. Government retirement programs.

If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC) or is jointly held (JT), in the optional column on the far left.

BLOCK B — Value of Asset

at close of reporting year. If you use a valuation method other than fair market value, please specify the method used. If an asset was sold and is included only because it generated income, the value should be "None."

BLOCK C — Type of Income

BLOCK D — Amount of Income

For IRA's and retirement plans that are *not* self-directed, you may write in "NA" for income.

BLOCK E — Transaction

Indicate if asset was purchased (P), sold (S), or exchanged (E) in reporting year.

	BLOCK A	BLOCK B												BLOCK C							BLOCK D										BLOCK E
		A None	B $1 – $1,000	C $1,001 – $15,000		E $15,001 – $50,000	F $50,001 – $100,000	G $100,001 – $250,000	H $250,001 – $500,000	I $500,001 – $1,000,000	J $1,000,001 – $5,000,000	K $5,000,001 – $25,000,000	L $25,000,001 – $50,000,000	Over $50,000,000	DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Type of Income (Specify. For Example, Partnership Income or Farm Income)	I None	II $1 – $200	III $201 – $1,000	IV $1,001 – $2,500	V $2,501 – $5,000	VI $5,001 – $15,000	VII $15,001 – $50,000	VIII $50,001 – $100,000	IX $100,001 – $1,000,000	X $1,000,001 – $5,000,000	XI Over $5,000,000	
SP DC JT	*Examples* Indefinite	SP	Mega Corp Stock Simon & Schuster 1st Bank of Paducah, KY accounts			X		X							X		X				Royalties								X			P P
	406 S. Capitol St., SE Wash,DC								X							X											X					
	Plow & Planter Employees Credit Union, IRA, Moline, IL			X													X							X								
	Wright Patman Federal Credit Union, Savings Accts. & IRAs, Wash., DC					X											X									X						

For additional assets and unearned income, use next page.

1120

SCHEDULE V — LIABILITIES

Report liabilities of over $10,000 owed to any one creditor ***at any time*** during the reporting period by you, your spouse, or dependent child. Mark the highest amount owed during the year. **Exclude**: Any mortgage on your personal residence (unless it is rented out), loans secured by automobiles, household furniture, or appliances, and liabilities owed to a spouse, or the child, parent, or sibling of you or your spouse. Report ***revolving charge accounts*** only if the balance at the end of the reporting period exceeded $10,000.

SP, DC, JT	Creditor	Type of Liability	Amount of Liability										
			B $10,001–$15,000	C $15,001–$50,000	D $50,001–$100,000	E $100,001–$250,000	F $250,001–$500,000	G $500,001–$1,000,000	H $1,000,001–$5,000,000	I $5,000,001–$25,000,000	J $25,000,001–$50,000,000	K Over $50,000,000
	Example First Bank of Wilmington, Delaware	Mortgage on 123 Main St., Dover, Del.				x						
	NationsBanc Mortgage Corp., Washington, DC	Mortgage on 406 S. Capitol St., SE				x						

SCHEDULE VI — GIFTS

Report the source, a brief description, and the value of all gifts totalling more than $250 received by you, your spouse, or a dependent child from any source during the year.

Exclude: Gifts from relatives, gifts of personal hospitality of an individual, local meals, and gifts to a spouse or dependent child that are totally independent of his or her relationship to you. Gifts with a value of $100 or less need not be added towards the $250 disclosure threshold.

Note: The gift rule (House Rule 51) prohibits gifts except as specifically provided in the rule.

Source	Description	Value
Example Mr. Joseph H. Smith, Anytown, Anystate	Silver Platter (determination on personal friendship received from Committee on Standards)	$270
	NONE	

Use additional sheets if more space is required.

SCHEDULE VII —TRAVEL PAYMENTS AND REIMBURSEMENTS

Identify the source and list travel itinerary, dates, and nature of expenses provided for travel and travel-related expenses totalling more than $250 received by you, your spouse, or a dependent child during the reporting period. Indicate whether a family member accompanied the traveler at the sponsor's expense, and the amount of time, if any, that was not at the sponsor's expense. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor.

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	Source	Date(s)	Point of Departure—Destination—Point of Return	Lodging? (Y/N)	Food? (Y/N)	Was a Family Member Included? (Y/N)	Any time not at sponsor's expense
Examples	Chicago Chamber of Commerce	Mar 2	Wash , D C —Chicago—Wash , D C	N	N	N	N
	Roycroft Corporation	Aug. 6–13	Wash , D C —Los Angeles—Cleveland	Y	Y	Y	4 Days
	National Association of Letter Carriers	June 21	New York, NY - St. Louis Chicago	N	N	N	N
	Vietnam Veterans of America	Aug. 6-7	Peoria, IL - Kansas City, Mo. - Washington, DC	Y	Y	N	N

This page may be copied if more space is required.

SCHEDULE VIII — POSITIONS

Report all positions, compensated or uncompensated, held during the current calendar year as an officer, director, trustee of an organization, partner, proprietor, representative, employee, or consultant of any corporation, firm, partnership, or other business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States

Exclude: Positions held in any religious, social, fraternal, or political entities; positions solely of an honorary nature; and positions listed on Schedule I.

Position	Name of Organization
Director	Skills, Inc., Moline, IL
Director	Center for Mind-Body Studies, Washington, DC

SCHEDULE IX — AGREEMENTS

Identify the date, parties to, and general terms of any agreement or arrangement with respect to: future employment; a leave of absence during the period of government service; continuation or deferral of payments by a former or current employer other than the U.S. Government, or continuing participation in an employee welfare or benefit plan maintained by a former employer

Date	Parties To	Terms of Agreement
	NONE	

GPO 1998 46-260 (mac)

Use additional sheets if more space is required.

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1997

FORM A

For use by Members, officers, and employees

99 MAY 13 PM 12:14

R. Terry Everett
(Full Name)

208 Cannon House Office Building
(Mailing Address)

Washington, DC 20515

Daytime Telephone: 202-255-2901

MC (Office Use Only) (10)

Filer Status	[X]	Member of the U.S. House of Representatives	State District: AL 2nd	[ ]	Officer or Employee	Employing Office
Report Type	[X]	Annual (May 15)	[ ] Amendment	[ ]	Termination	Termination Date

A *$200 penalty* shall be assessed against anyone who files more than 30 days late.

PRELIMINARY INFORMATION — ANSWER EACH OF THESE QUESTIONS

I. Did you or your spouse have "earned" income (e.g., salaries or fees) of $200 or more from any source in the reporting period? **If yes, complete and attach Schedule I.** — Yes [X] No [ ]

II. Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? **If yes, complete and attach Schedule II.** — Yes [ ] No [X]

III. Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? **If yes, complete and attach Schedule III.** — Yes [X] No [ ]

IV. Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset worth more than $1,000 in the reporting period? **If yes, complete and attach Schedule IV.** — Yes [X] No [ ]

V. Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? **If yes, complete and attach Schedule V.** — Yes [X] No [ ]

VI. Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $250 and not otherwise exempt)? **If yes, complete and attach Schedule VI** — Yes [ ] No [X]

VII. Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $250 from one source)? **If yes, complete and attach Schedule VII** — Yes [ ] No [X]

VIII. Did you hold any reportable positions on or before the date of filing in the current calendar year? **If yes, complete and attach Schedule VIII** — Yes [ ] No [X]

IX. Did you have any reportable agreement or arrangement with an outside entity? **If yes, complete and attach Schedule IX** — Yes [ ] No [X]

Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION — ANSWER EACH OF THESE QUESTIONS

TRUSTS—Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child? — Yes [ ] No [X]

EXEMPTION—Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption? — Yes [ ] No [X]

CERTIFICATION — THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended. The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct or its designee. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil penalties and criminal sanctions (*See* 5 U.S.C. app. 4 §104 and 18 U.S.C. §1001).

SIGNATURE OF REPORTING INDIVIDUAL: R. Terry Everett

DATE (Month/Day/Year): 5-13-98

1124

SCHEDULE I — EARNED INCOME

List the source, type, and amount of earned income from any source (other than the filer's current employment by the U.S. Government) totalling $200 or more during the preceding calendar year. For a spouse, list the source and amount of any honoraria; list only the source for other spouse earned income exceeding $1,000

	Source	Type	Amount
Examples	Keene State	Approved Teaching Fee	$6,000
	State of Maryland	Legislative Pension	$9,000
	Civil War Roundtable (Oct. 2nd)	Spouse Speech	$1,000
	Ontario County Board of Education	Spouse Salary	NA
	U.S. House of Representatives - Congressman	U.S. Representative	126,040
	Union Springs Newspaper -Wife	Management	31,800

For payments to charity in lieu of honoraria, use Schedule II.

SCHEDULE II — PAYMENTS IN LIEU OF HONORARIA MADE TO CHARITY

List the source, activity (i.e., speech, appearance, or article), date, and amount of any payment made by the sponsor of an event to a charitable organization in lieu of an honorarium. A separate confidential list of charities receiving such payments must be filed directly with the Committee on Standards of Official Conduct. An envelope for transmitting the list is included in each Member's filing package.

Source	Activity	Date	Amount
Examples Association of American Associations, Wash., D.C.	Speech	Feb. 2, 1997	$2,000
XYZ Magazine	Article	Aug. 13, 1997	$500
None			

This page may be copied if more space is required.

Name R. Terry Everett | Page 4 of 10

SCHEDULE III — ASSETS AND "UNEARNED" INCOME

BLOCK A — Asset and/or Income Source

Identify (a) each asset held for investment or production of income with a fair market value exceeding $1,000 at the end of the reporting year, and (b) any other asset or source of income which generated more than $200 in "unearned" income during the year. For rental property or land, provide an address. Provide full names of any mutual funds. For an IRA or retirement plan that is *self directed*, list the underlying assets worth more than $1,000. For an IRA or retirement plan that is not selfdirected, name the institution holding the account.

Exclude: Your personal residence(s) (unless there is rental income), any debt owed to you by your spouse, or by your or your spouse's child, parent, or sibling, any deposits totalling $5,000 or less in personal savings accounts, any financial interests in or income derived from U.S. Government retirement programs.

If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC) or is jointly held (JT), in the optional column on the far left.

SP	*Examples*	SP	Mega Corp Stock
DC			Simon & Schuster
JT			1st Bank of Paducah KY accounts

BLOCK B — Value of Asset

at close of reporting year. If you use a valuation method other than fair market value, please specify the method used. If an asset was sold and is included only because it generated income, the value should be "None."

	A	B	C	E	F	G	H	I	J	K	L
	None	$1 – $1,000	$1,001 – $15,000	$15,001 – $50,000	$50,001 – $100,000	$100,001 – $250,000	$250,001 – $500,000	$500,001 – $1,000,000	$1,000,001 – $5,000,000	$5,000,001 – $25,000,000	$25,000,001 – $50,000,000	Over $50,000,000
Examples		Indefinite			X						
						X						

BLOCK C — Type of Income

	DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Type of Income (Specify, For Example Partnership Income or Farm Income)
Examples	X		X				Royalties

BLOCK D — Amount of Income

For IRA's and retirement plans that are *not* self-directed, you may write in "NA" for income.

	I	II	III	IV	V	VI	VII	VIII	IX	X	XI
	None	$1 – $200	$201 – $1,000	$1,001 – $2,500	$2,501 – $5,000	$5,001 – $15,000	$15,001 – $50,000	$50,001 – $100,000	$100,001 – $1,000,000	$1,000,001 – $5,000,000	Over $5,000,000
Examples				X		X			X		

BLOCK E — Transaction

Indicate if asset was purchased (P), sold (S), or exchanged (E) in reporting year

		A	B	C	E	F	G	H	I	J	K	L	DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Type of Income	I	II	III	IV	V	VI	VII	VIII	IX	X	XI	BLOCK E
	Examples		Indefinite			X							X						Royalties				X					X			P
						X									X										X						P
S	Merrill-Lynch - CMA			X									X								X										
	Merrill Lynch - CMA					X							X												X						
	Merrill Lynch - U.S. Treasury Notes							X							X												X				
	400 acre farm - Houston County, AL							X											Farming						X						
	House, Santa Rosa Bch Florida						X																								

For additional assets and unearned income, use next page.

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SCHEDULE III — ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Name R. Terry Everett | Page 5 of 10

SP. DC JT	BLOCK A Asset and/or Income Source	BLOCK B Year-End Value of Asset											BLOCK C Type of Income							BLOCK D Amount of Income										BLOCK E Transaction
		A None	B $1 - $1,000	C $1,001 - $15,000	D $15,001 - $50,000	E $50,001 - $100,000	F $100,001 - $250,000	G $250,001 - $500,000	H $500,001 - $1,000,000	I $1,000,001 - $5,000,000	J $5,000,001 - $25,000,000	K $25,000,001 - $50,000,000	L Over $50,000,000	DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Type of Income (Specify)	I None	II $1 - $200	III $201 - $1,000	IV $1,001 - $2,500	V $2,501 - $5,000	VI $5,001 - $15,000	VII $15,001 - $50,000	VIII $50,001 - $100,000	IX $100,001 - $1,000,000	X $1,000,001 - $5,000,000	XI Over $5,000,000	
	Due from Everett for Congress						X									X					X										P S E
	Merrill-Lynch Mutual Funds																														
	AIM Capital Dev					X								X										X							P
	Davis NY Venture Fd					X								X										X							P
	J.Hancock Financial						X							X											X						P
	ML Growth Fd					X								X											X						P
	Pioneer Growth					X								X											X						P
	S&P Ind Port				X									X										X							P
	Select 10-Hong Kong			X										X								X									P
	Select 10 -Dow					X								X											X						P
	Select 10-UK			X										X								X									P
	Select 10-Japan			X										X								X									P
	Temple Ten World Fd					X								X											M						P
	Merrill-Lynch Accrued Int.		X											X												X					P
	Annuity-PFL Endeavor Variable						X							X												X					P
	Certificates of Deposits at Colonial Bank							X								X											X				
	Colonial Bank - checking			X												X						X									
	Colonial Bank - interest acct.							X								X											X				
	Union Spgs Newspaper, Inc., stock						X							X							X										

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SCHEDULE III — ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Name R. Terry Everett | Page 6 of 10

SP DC JT	BLOCK A Asset and/or Income Source	BLOCK B Year-End Value of Asset												BLOCK C Type of Income							BLOCK D Amount of Income											BLOCK E Transaction
		A None	B $1 – $1,000	C $1,001 – $15,000	D $15,001 – $50,000	E $50,001 – $100,000	F $100,001 – $250,000	G $250,001 – $500,000	H $500,001 – $1,000,000	I $1,000,001 – $5,000,000	J $5,000,001 – $25,000,000	K $25,000,001 – $50,000,000	L Over $50,000,000	DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Type of Income (Specify)	I None	II $1 – $200	III $201 – $1,000	IV $1,001 – $2,500	V $2,501 – $5,000	VI $5,001 – $15,000	VII $15,001 – $50,000	VIII $50,001 – $100,000	IX $100,001 – $1,000,000	X $1,000,001 – $5,000,000	XI Over $5,000,000	P S F
	Congressional FCU						X									X									X							
	Townhouse-WashingtonDC							X																								
	Compass Bank				X											X							X									E
	Colonial Bancgroup-9766							X						X											X							
SP	" " -5224						X							X										X								
JT	" " -5000						X							X										X								
	Note receivable on 2 personal residences in Houston and Coffee Co Alabama					X										X										X						
	IRA-Colonial Bank			X												X							X									
SP	IRA-Colonial Bank			X												X							X									
	Mobile, AL Municipal Bonds								X							X										X						S

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SCHEDULE IV — TRANSACTIONS

Name R. Terry Everett | Page 7 of 10

Report any purchase, sale, or exchange by you, your spouse, or dependent child during the reporting year of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child, or the purchase or sale of your personal residence, unless it is rented out.

SP, DC, JT	Asset	Type of Transaction: PURCHASE	SALE	EXCHANGE	Date (MO/DAY/YR)	Amount of Transaction: B ($1,001 - $15,000)	C ($15,001 - $50,000)	D ($50,001 - $100,000)	E ($100,001 - $250,000)	F ($250,001 - $500,000)	G ($500,001 - $1,000,000)	H ($1,000,001 - $5,000,000)	I ($5,000,001 - $25,000,000)	J ($25,000,001 - $50,000,000)	K (Over $50,000,000)
SP	*Example* Mega Corporation Common Stock	x			10-12-97		x								
	Money Market - Compass Bank			x	1/4/97		x								
	Mobile Co Municipal Bonds		x		10/10/97						x				
JT	Colonial Bancgroup-5000 shares	x			9/26/97				x						
	Merrill-Lynch Mutual Funds														
	AIM Capital Dev.	x			10/15/97			x							
	Davis NY Venture Fd.	x			"			x							
	J.Hancock Financial	x			"				x						
	Merrill-Lynch Growth Fund	x			"			x							
	Pioneer Growth Fd	x			"			x							
	S&P Industrial Port.	x			"		x								
	Select 10 - Hong Kong	x			"	x									
	" - Dow	x			"			x							
	" - U.K.	x			"	x									
	" - Japan	x			"	x									
	Templeton World Fd.	x			"			x							
	Merrill Lynch accrued interest	x			12/31/97	x									
	Annuity PFL Endeavor	x			10/15/97				x						

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SCHEDULE V — LIABILITIES

Report liabilities of over $10,000 owed to any one creditor ***at any time*** during the reporting period by you, your spouse, or dependent child. Mark the highest amount owed during the year. **Exclude**: Any mortgage on your personal residence (unless it is rented out), loans secured by automobiles, household furniture, or appliances, and liabilities owed to a spouse, or the child, parent, or sibling of you or your spouse. Report ***revolving charge accounts*** only if the balance at the end of the reporting period exceeded $10,000.

SP, DC, JT	Creditor	Type of Liability	Amount of Liability B $10,001–$15,000	C $15,001–$50,000	D $50,001–$100,000	E $100,001–$250,000	F $250,001–$500,000	G $500,001–$1,000,000	H $1,000,001–$5,000,000	I $5,000,001–$25,000,000	J $25,000,001–$50,000,000	K Over $50,000,000
	Example First Bank of Wilmington, Delaware	Mortgage on 123 Main St., Dover, Del				x						
	Colonial Bank - campaign loans						X					
	Magnolia Bank - personal home	Home loan	Less than $10,000									
	Charles Taylor - farm loan	Farm loan			x							

SCHEDULE VI — GIFTS

Report the source, a brief description, and the value of all gifts totalling more than $250 received by you, your spouse, or a dependent child from any source during the year.

Exclude: Gifts from relatives, gifts of personal hospitality of an individual, local meals, and gifts to a spouse or dependent child that are totally independent of his or her relationship to you. Gifts with a value of $100 or less need not be added towards the $250 disclosure threshold.

Note: The gift rule (House Rule 51) prohibits gifts except as specifically provided in the rule.

Source	Description	Value
Example Mr. Joseph H. Smith, Anytown, Anystate	Silver Platter (determination on personal friendship received from Committee on Standards)	$270
None		

Use additional sheets if more space is required.

SCHEDULE VII —TRAVEL PAYMENTS AND REIMBURSEMENTS

Identify the source and list travel itinerary, dates, and nature of expenses provided for travel and travel-related expenses totalling more than $250 received by you, your spouse, or a dependent child during the reporting period. Indicate whether a family member accompanied the traveler at the sponsor's expense, and the amount of time, if any, that was not at the sponsor's expense. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor.

Exclude: Travel-related expenses provided by federal, state, and local governments, or by a foreign government required to be separately reported under the Foreign Gifts and Decorations Act (5 U.S.C. § 7342); travel paid for by a Federal political committee; travel provided to a spouse or dependent child that is totally independent of his or her relationship to you

	Source	Date(s)	Point of Departure—Destination—Point of Return	Lodging? (Y/N)	Food? (Y/N)	Was a Family Member Included? (Y/N)	Any time not at sponsor's expense
Examples	Chicago Chamber of Commerce	Mar 2	Wash., D.C.—Chicago—Wash., D.C.	N	N	N	N
	Roycroft Corporation	Aug 6–13	Wash., D.C.—Los Angeles—Cleveland	Y	Y	Y	4 Days
	None						

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SCHEDULE VIII — POSITIONS

Report all positions, compensated or uncompensated, held during the current calendar year as an officer, director, trustee of an organization, partner, proprietor, representative, employee, or consultant of any corporation, firm, partnership, or other business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States.

Exclude: Positions held in any religious, social, fraternal, or political entities; positions solely of an honorary nature, and positions listed on Schedule I

Position	Name of Organization
President	Union Springs (AL) Herald newspaper

SCHEDULE IX — AGREEMENTS

Identify the date, parties to, and general terms of any agreement or arrangement with respect to: future employment, a leave of absence during the period of government service; continuation or deferral of payments by a former or current employer other than the U.S. Government, or continuing participation in an employee welfare or benefit plan maintained by a former employer

Date	Parties To	Terms of Agreement
	None	

GPO 1998 46-260 (mac)

Use additional sheets if more space is required.

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1997

FORM A
For use by Members, officers, and employees

RECEIVED
98 MAY 15 PM 2:40

Thomas W. Ewing
(Full Name)

310 West Lincoln Street
(Mailing Address)

Pontiac, IL 61764

Daytime Telephone
(815) 844-7660

MAY 11 1998
(Office Use Only)

(11)

Filer Status: [X] Member of the U.S. House of Representatives — State Illinois, District 15 — [ ] Officer or Employee — Employing Office

Report Type: [X] Annual (May 15) — [ ] Amendment — [ ] Termination — Termination Date

A *$200 penalty* shall be assessed against anyone who files more than 30 days late.

PRELIMINARY INFORMATION — ANSWER EACH OF THESE QUESTIONS

I. Did you or your spouse have "earned" income (e.g., salaries or fees) of $200 or more from any source in the reporting period?
If yes, complete and attach Schedule I — Yes [X] No [ ]

II. Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period?
If yes, complete and attach Schedule II — Yes [ ] No [X]

III. Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period?
If yes, complete and attach Schedule III. — Yes [X] No [ ]

IV. Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset worth more than $1,000 in the reporting period?
If yes, complete and attach Schedule IV — Yes [X] No [ ]

V. Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period?
If yes, complete and attach Schedule V. — Yes [X] No [ ]

VI. Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $250 and not otherwise exempt)?
If yes, complete and attach Schedule VI — Yes [X] No [ ]

VII. Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $250 from one source)?
If yes, complete and attach Schedule VII — Yes [X] No [ ]

VIII. Did you hold any reportable positions on or before the date of filing in the current calendar year?
If yes, complete and attach Schedule VIII — Yes [X] No [ ]

IX. Did you have any reportable agreement or arrangement with an outside entity?
If yes, complete and attach Schedule IX — Yes [X] No [ ]

Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION — ANSWER EACH OF THESE QUESTIONS

TRUSTS—Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child? — Yes [ ] No [X]

EXEMPTION—Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption? — Yes [ ] No [X]

CERTIFICATION — THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended. The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct or its designee. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil penalties and criminal sanctions (*See* 5 U.S.C. app. 4, §104 and 18 U.S.C. §1001).

SIGNATURE OF REPORTING INDIVIDUAL: Thomas W. Ewing

DATE (Month/Day/Year): May 8, 1998

SCHEDULE I — EARNED INCOME

List the source, type, and amount of earned income from any source (other than the filer's current employment by the U.S. Government) totalling $200 or more during the preceding calendar year. For a spouse, list the source and amount of any honoraria, list only the source for other spouse earned income exceeding $1,000.

	Source	Type	Amount
Examples	Keene State	Approved Teaching Fee	$6,000
	State of Maryland	Legislative Pension	$9,000
	Civil War Roundtable (Oct 2nd)	Spouse Speech	$1,000
	Ontario County Board of Education	Spouse Salary	NA
	State Farm Mutual Automobile Insurance Co.	Spouse Salary	NA
	Satter, Beyer & Spires (deferred compensation for sale of assets and legal services performed prior to taking office in 1991		$ 754
	State of Illinois	Legislative Pension	$ 45,261
	Livingston County Broadcasters, Inc.	Salary	$ 5,000
	Bill Emerson Golf Tournament winner - "Skill" prize won was two airline tickets on Southwest Airlines	Prize	$ 1,196

For payments to charity in lieu of honoraria, use Schedule II.

SCHEDULE II — PAYMENTS IN LIEU OF HONORARIA MADE TO CHARITY

List the source, activity (i.e., speech, appearance, or article), date, and amount of any payment made by the sponsor of an event to a charitable organization in lieu of an honorarium. A separate confidential list of charities receiving such payments must be filed directly with the Committee on Standards of Official Conduct. An envelope for transmitting the list is included in each Member's filing package

Source	Activity	Date	Amount
Examples Association of American Associations, Wash., D.C.	Speech	Feb. 2, 1997	$2,000
XYZ Magazine	Article	Aug. 13, 1997	$500
NONE			

This page may be copied if more space is required.

Name: Thomas W. Ewing | Page 4 of 11

SCHEDULE III — ASSETS AND "UNEARNED" INCOME

BLOCK A **Asset and/or Income Source**	BLOCK B **Value of Asset**	BLOCK C **Type of Income**	BLOCK D **Amount of Income**	BLOCK E **Transaction**
Identify (a) each asset held for investment or production of income with a fair market value exceeding $1,000 at the end of the reporting year, and (b) any other asset or source of income which generated more than $200 in "unearned" income during the year. For rental property or land, provide an address. Provide full names of any mutual funds. For an IRA or retirement plan that is self-directed, list the underlying assets worth more than $1,000. For an IRA or retirement plan that is not self-directed, name the institution holding the account. **Exclude:** Your personal residence(s) (unless these is rental income), any debt owed to you by your spouse, or by your or your spouse's child, parent, or sibling, any deposits totaling $5,000 or less in personal savings accounts, any financial interests in or income derived from U.S. Government retirement programs. If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC) or is jointly held (J), in the optional column on the far left.	If you use a valuation method other than fair market value, please specify the method used. If an asset was sold and is included only because it generated income, the value should be "None."	Owner Type of Income (Specify for Example Rental Income or Fair Income)	For IRA's and retirement plans that are *not* self-directed, you may write in "NA" for income.	Indicate if asset was purchased (P), sold (S), or exchanged (E) in reporting year
SP DC J *Examples*	A B C D E F G H I J K L None $1 – $1,000 $1,001 – $15,000 $15,001 – $50,000 $50,001 – $100,000 $100,001 – $250,000 $250,001 – $500,000 $500,001 – $1,000,000 $1,000,001 – $5,000,000 $5,000,001 – $25,000,000 $25,000,001 – $50,000,000 Over $50,000,000 Indicate	DIVIDENDS RENT INTEREST CAPITAL GAINS EXCEPTED TRUST QUALIFIED BLIND TRUST Sale of Lots Other None	I II III IV V VI VII VIII IX X XI None $1 – $200 $201 – $1,000 $1,001 – $2,500 $2,501 – $5,000 $5,001 – $15,000 $15,001 – $50,000 $50,001 – $100,000 $100,001 – $1,000,000 $1,000,001 – $5,000,000 Over $5,000,000	P S E
Pontiac National Bank Pontiac, IL (account)				
Principal National Bank Corp Inc., Pontiac, IL (stock)	X	X	X	
Pontiac Bancorp., Inc. Pontiac, IL (stock)	X	X	X	
Lexington Bank: Lexington, IL (account)	X	X	X	
State Bank of Graymont Graymont, IL (account)	X	X	X	
Irving Trust Co. N.Y., N.Y. (account)	X	X	X	

For additional assets and unearned income, use next page.

SCHEDULE III — ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Name Thomas W. Ewing

SP DC JT	BLOCK A Asset and/or Income Source	BLOCK B Year-End Value of Asset											BLOCK C Type of Income								BLOCK D Amount of Income										BLOCK E Transaction
		A None	B $1 – $1,000	C $1,001 – $15,000	D $15,001 – $50,000	E $50,001 – $100,000	F $100,001 – $250,000	G $250,001 – $500,000	H $500,001 – $1,000,000	I $1,000,001 – $5,000,000	J $5,000,001 – $25,000,000	K $25,000,001 – $50,000,000	L Over $50,000,000	DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Sale of Lots	Other Type of Income (Specify)	I None	II $1 – $200	III $201 – $1,000	IV $1,001 – $2,500	V $2,501 – $5,000	VI $5,001 – $15,000	VII $15,001 – $50,000	VIII $50,001 – $100,000	IX $100,001 – $1,000,000	X $1,000,001 – $5,000,000	XI Over $5,000,000	P S E
	Connell Farm, Logan Co., IL 1/2 Int. in 137 a.					X									X												X				
	S.Y.Ewing Trust Farm,McLean Co. IL 1/2 Int. 160 a.					X									X												X				
	Odell Farm Trust 625, 300a						X								X												X				
	Livingston Co. (gross income)					X									X												X				
	Newtown Farm, 92 a. Livingston Co. (gross income)						X								X					X							X				
	Fairway View Subdivision, Livingston Co.1/2 Int.15a.(net)							X																			X				
	Fairway View Farm,Deerfield Rd. Pontiac, IL 1/2 Int.30 a.(gross)						X								X												X				
	McLean Rental House McLean, IL (gross)			X											X									X							
JT	Residence, 310 W. Lincoln Pontiac, IL						X															X									
	Livingston Co. Broadcasters, Inc., 2 Shares					X								X										X							
	State of IL Employees Deferred Compensation Plan					X																NA									
	State Farm Life Ins. Co Flexible Prem. Annuity IRA			X																		NA									
	Lot 6, Gardner-Ewing Add. Fairway View Sub.Pontiac, IL				X																	X									
	Pontiac National Bank Thomas W. Ewing Profit Sharing Pension Plan Assets:																														
	Cash		X											X										X							
	Kemper Portfolios			X										X										X							
	Community Bank-Galesburg			X										X									X								
	Archer Daniels Midland		X											X									X								
	Bellsouth Corp.			X										X									X								
	Boeing Co.			X										X									X							P	
	Browning Ferris Inds.			X										X									X							S	
	Caterpillar Inc. Del.		X											X									X								
	Donnelly R.R. & Sons		X											X									X								

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SCHEDULE III — ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Name Thomas W. Ewing | Page 6 of 11

	BLOCK A Asset and/or Income Source	BLOCK B Year-End Value of Asset											BLOCK C Type of Income							BLOCK D Amount of Income										BLOCK E Transaction
		A None	B $1 – $1,000	C $1,001 – $15,000	D $15,001 – $50,000	E $50,001 – $100,000	F $100,001 – $250,000	G $250,001 – $500,000	H $500,001 – $1,000,000	I $1,000,001 – $5,000,000	J $5,000,001 – $25,000,000	K $25,000,001 – $50,000,000	L Over $50,000,000	DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Sale of lots / Other Type of Income (Specify)	I None	II $1 – $200	III $201 – $1,000	IV $1,001 – $2,500	V $2,501 – $5,000	VI $5,001 – $15,000	VII $15,001 – $50,000	VIII $50,001 – $100,000	IX $100,001 – $1,000,000	X $1,000,001 – $5,000,000	XI Over $5,000,000	P, S, E
	DuPont E I De Nemours &Co			X									X								X									P
	Eastman Kodak Co.		X										X								X									P
	GTE Corp			X									X								X									
	General Elec. Co.				X								X									X								
	Illinova Corp.			X									X									X								
	Intel Corp.			X									X								X									P
	McDonalds Corp.			X									X								X									
	Microsoft Corp.			X									X								X									P
	Morgan J P & Co. Inc.			X									X								X									P
	Motorola, Inc.			X									X								X									
	Pepsico, Inc.			X									X								X									
	PNB Holding Co.				X								X										X							
	Southwest Royalties			X									X								X									
	Tricon Global Restaurants		X										X								X									P
	WMX Technologies, Inc.			X									X								X									S
	WWNL Companies		X										X										X							
SP	Principal National Bancorp. stock				X								X											X						
SP	State Farm Illinois FCU				X											X									X					
SP	Bank One, checking			X																	X									
SP	State Farm Growth Fund, Inc Mutual Fund (retirement fund)						X						X												X					
SP	State Farm Balanced Fund Mutual Fund (retirement fund)					X							X													X				
SP	State Farm Balanced Fund Mutual Fund			X									X										X							

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SCHEDULE III — ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Name Thomas W. Ewing | Page 7 of 11

SP/JT/DC	BLOCK A Asset and/or Income Source	BLOCK B Year-End Value of Asset: A None	B $1 – $1,000	C $1,001 – $15,000	D $15,001 – $50,000	E $50,001 – $100,000	F $100,001 – $250,000	G $250,001 – $500,000	H $500,001 – $1,000,000	I $1,000,001 – $5,000,000	J $5,000,001 – $25,000,000	K $25,000,001 – $50,000,000	L Over $50,000,000	BLOCK C Type of Income: DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Sale of Lots	Other Type of Income (Specify)	BLOCK D Amount of Income: I None	II $1 – $200	III $201 – $1,000	IV $1,001 – $2,500	V $2,501 – $5,000	VI $5,001 – $15,000	VII $15,001 – $50,000	VIII $50,001 – $100,000	IX $100,001 – $1,000,000	X $1,000,001 – $5,000,000	XI Over $5,000,000	BLOCK E Transaction: P / S / E
SP	State Farm Growth Fund Mutual Fund			X										X										X								
SP	LaGrange Condo, 416 East Ave., Cook County, IL					X									X											X							
JT	D.C. Condo, 761 Delaware Sq., Washington, DC						X								X											X							
	Livingston Service Co. stock		X											X								X										
	Lot 16, Gardner-Ewing Add. Pontiac, IL (¼ interest)				X															X							X					S
	Lot 24, Gardner-Ewing Add. Pontiac, IL (¼ interest)				X															X							X					S
	Lot 33, Fairway View Sub. Pontiac, IL (¼ interest)				X															X							X					S

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SCHEDULE IV — TRANSACTIONS

Name Thomas W. Ewing | Page 8 of 11

Report any purchase, sale, or exchange by you, your spouse, or dependent child during the reporting year of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child, or the purchase or sale of your personal residence, unless it is rented out.

SP, DC, JT	Asset	Type of Transaction: PURCHASE	SALE	EXCHANGE	Date (MO/DAY/YR)	Amount of Transaction: B $1,001–$15,000	C $15,001–$50,000	D $50,001–$100,000	E $100,001–$250,000	F $250,001–$500,000	G $500,001–$1,000,000	H $1,000,001–$5,000,000	I $5,000,001–$25,000,000	J $25,000,001–$50,000,000	K Over $50,000,000
SP	*Example* Mega Corporation Common Stock	X			10-12-97		X								
	Lot 16, Gardner-Ewing Addition to Fairway View Subdivision, Pontiac, IL (½ interest)		X		03/14/97		X								
	Lot 24, Gardner-Ewing Addition to Fairway View Subdivision, Pontiac, IL (½ interest)		X		08/15/97		X								
	Lot 33, Fairway View Subdivision Pontiac, IL (½ interest)		X		03/17/97		X								
	Browning Ferris Inds. stock		X		07/9/97	X									
	WMX Technologies, Inc., stock		X		07/9/97	X									
	Boeing Co., stock	X			07/14/97	X									
	DuPont E I De Nemours & Co., stock	X			07/14/97	X									
	Eastman Kodak Co., stock	X			07/14/97	X									
	Intel Corp., stock	X			07/14/97	X									
	Microsoft Corp., stock	X			07/14/97	X									
	Morgan J P & Co., Inc., stock	X			07/14/97	X									
	Tricon Global Restaurants, stock	X			07/14/97	X									

This page may be copied if more space is required.

Name	Thomas W. Ewing	Page 9 of 11

SCHEDULE V — LIABILITIES

Report liabilities of over $10,000 owed to any one creditor ***at any time*** during the reporting period by you, your spouse, or dependent child. Mark the highest amount owed during the year. **Exclude:** Any mortgage on your personal residence (unless it is rented out), loans secured by automobiles, household furniture, or appliances, and liabilities owed to a spouse, or the child, parent, or sibling of you or your spouse. Report ***revolving charge accounts*** only if the balance at the end of the reporting period exceeded $10,000.

SP, DC, JT	Creditor	Type of Liability	Amount of Liability									
			B $10,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H $1,000,001 - $5,000,000	I $5,000,001 - $25,000,000	J $25,000,001 - $50,000,000	K Over $50,000,000
Example	First Bank of Wilmington, Delaware	Mortgage on 123 Main St., Dover, De				X						
JT	Pontiac National Bank, Pontiac, IL	Mortgage on 310 W. Lincoln St., Pontiac, IL				X						
	Pontiac National Bank, Pontiac, IL	Mortgage on Odell, IL farm			X							
SP	Pontiac National Bank, Pontiac, IL	Mortgage on LaGrange, IL condo			X							

SCHEDULE VI — GIFTS

Report the source, a brief description, and the value of all gifts totalling more than $250 received by you, your spouse, or a dependent child from any source during the year.

Exclude: Gifts from relatives, gifts of personal hospitality of an individual, local meals, and gifts to a spouse or dependent child that are totally independent of his or her relationship to you. Gifts with a value of $100 or less need not be added towards the $250 disclosure threshold.

Note. The gift rule (House Rule 51) prohibits gifts except as specifically provided in the rule.

Source	Description	Value
Example Mr. Joseph H. Smith, Anytown, Anystate	Silver Platter (determination on personal friendship received from Committee on Standards)	$270

Use additional sheets if more space is required.

Name	Thomas W. Ewing	Page 10 of 11

SCHEDULE VII —TRAVEL PAYMENTS AND REIMBURSEMENTS

Identify the source and list travel itinerary, dates, and nature of expenses provided for travel and travel-related expenses totalling more than $250 received by you, your spouse, or a dependent child during the reporting period. Indicate whether a family member accompanied the traveler at the sponsor's expense, and the amount of time, if any, that was not at the sponsor's expense. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor.

Exclude: Travel-related expenses provided by federal, state, and local governments, or by a foreign government required to be separately reported under the Foreign Gifts and Decorations Act (5 U.S.C. § 7342); travel paid for by a Federal political committee; travel provided to a spouse or dependent child that is totally independent of his or her relationship to you.

Source	Date(s)	Point of Departure—Destination—Point of Return	Lodging? (Y/N)	Food? (Y/N)	Was a Family Member Included? (Y/N)	Any time not at sponsor's expense
Examples: Chicago Chamber of Commerce	Mar. 2	Wash., D.C.—Chicago—Wash., D.C.	N	N	N	N
Examples: Roycroft Corporation	Aug. 6-13	Wash., D.C.—Los Angeles—Cleveland	Y	Y	Y	4 Days
Chicago Board of Trade/Chicago Mercantile Exchange	March 13-14 1997	Washington,DC - West Palm Beach, FL - Washngton, DC	Y	N	N	N
American Sugar Alliance	August 2-5 1997	Chicago, IL - Bozeman, MN -Chicago, IL	Y	Y	Y	N
American Crop Protection Association	Sept. 27-28 1997	Washington,DC - Greenbrier, WV - Washington,DC	Y	Y	Y	N
American Bankers Association	Nov. 10, 1997	Bloomington, IL - Milwaukee, WI - Bloomington, IL	N	N	N	N

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Name	Page 11 of 11
Thomas W. Ewing	

SCHEDULE VIII — POSITIONS

Report all positions, compensated or uncompensated, held during the current calendar year as an officer, director, trustee of an organization, partner, proprietor, representative, employee, or consultant of any corporation, firm, partnership, or other business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States.

Exclude: Positions held in any religious, social, fraternal, or political entities, positions solely of an honorary nature, and positions listed on Schedule I

Position	Name of Organization
Director	Principal National Bank Corporation, Inc. (Uncompensated)
Director	Livingston County Broadcasters, Inc.

SCHEDULE IX — AGREEMENTS

Identify the date, parties to, and general terms of any agreement or arrangement with respect to future employment, a leave of absence during the period of government service; continuation or deferral of payments by a former or current employer other than the U S Government, or continuing participation in an employee-welfare or benefit plan maintained by a former employer

Date	Parties To	Terms of Agreement
	State of Illinois Deferred Compensation Plan	No distribution until age 65.
	State of Illinois General Assembly Pension	Benefits currently being received-payable at age 55
	Thomas W. Ewing Profit-Sharing Pension	Owner of this plan does not currently qualify for any benefits under this plan.

GPO 1998 46-260 (mac)

Use additional sheets if more space is required.

THOMAS W. EWING
15TH DISTRICT, ILLINOIS
DEPUTY MAJORITY WHIP
COMMITTEES
AGRICULTURE
SUBCOMMITTEES
RISK MANAGEMENT AND SPECIALTY CROPS
CHAIRMAN
DEPARTMENT OPERATIONS, NUTRITION, AND FOREIGN AGRICULTURE
TRANSPORTATION AND INFRASTRUCTURE
SUBCOMMITTEES
AVIATION
SURFACE TRANSPORTATION
SCIENCE
SUBCOMMITTEES
BASIC RESEARCH
TECHNOLOGY

98 JUN 11 AM 9:51

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Congress of the United States

House of Representatives

Washington, DC 20515

WASHINGTON OFFICE
RAYBURN HOUSE OFFICE BUILDING
WASHINGTON, DC 20515
(202) 225-2371
DISTRICT OFFICES
102 E. MAIN STREET
ST. PAUL, IL 62281
(618) 374-0165
2431 E. WASHINGTON STREET, SUITE 101
BLOOMINGTON, IL 61704
(309) 662-8871
210 WEST WATER STREET
PANTAGRAPH, IL 61764
(815) 844-7660
120 NORTH VERMILION STREET
SUITE A
DANVILLE, IL 61834
(217) 431-8210

June 10, 1998

(1)

V

MC

Robin H. Carle,
Clerk of the House of Representatives
Legislative Resource Center
B-106 Cannon House Office Building
Washington, D.C. 20515

Dear Clerk of the House:

This letter amends my Financial Disclosure Statement for 1997. On page 1, Question VI was inadvertently marked "yes" when in fact it should have been marked "no". There were no gifts received for the year 1997. Please see that my 1997 Financial Disclosure Statement is amended. Thank you for your assistance in this matter.

Sincerely,

Thomas W. Ewing
Member of Congress

TWE:kk

PRINTED ON RECYCLED PAPER

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1997

FORM A
For use by Members, officers, and employees

98 MAY 15 PM 1:17

U.S. HOUSE OF REPRESENTATIVES

Hon. Eni F.H. Faleomavaega
(Full Name)

2422 Rayburn House Office Bldg.
(Mailing Address)

Washington, DC 20515

202-225-8577
Daytime Telephone

HAND DELIVERED
MC
(Office Use Only)

(4)

Filer Status	[X] Member of the U.S. House of Representatives — State — District	[ ] Officer or Employee	Employing Office	**A *$200 penalty* shall be assessed against anyone who files more than 30 days late.**
Report Type	[X] Annual (May 15)	[ ] Amendment	[ ] Termination — Termination Date	

PRELIMINARY INFORMATION — ANSWER EACH OF THESE QUESTIONS

I Did you or your spouse have "earned" income (e.g., salaries or fees) of $200 or more from any source in the reporting period? **If yes, complete and attach Schedule I.** — Yes [X] No [ ]

II Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? **If yes, complete and attach Schedule II.** — Yes [ ] No [X]

III Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? **If yes, complete and attach Schedule III.** — Yes [X] No [ ]

IV Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset worth more than $1,000 in the reporting period? **If yes, complete and attach Schedule IV.** — Yes [ ] No [X]

V Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? **If yes, complete and attach Schedule V.** — Yes [ ] No [XX]

VI Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $250 and not otherwise exempt)? **If yes, complete and attach Schedule VI.** — Yes [ ] No [X]

VII Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $250 from one source)? **If yes, complete and attach Schedule VII.** — Yes [X] No [ ]

VIII Did you hold any reportable positions on or before the date of filing in the current calendar year? **If yes, complete and attach Schedule VIII.** — Yes [ ] No [X]

IX Did you have any reportable agreement or arrangement with an outside entity? **If yes, complete and attach Schedule IX.** — Yes [ ] No [X]

Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION — ANSWER EACH OF THESE QUESTIONS

TRUSTS—Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child? — Yes [ ] No [X]

EXEMPTION—Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption? — Yes [ ] No [X]

CERTIFICATION — THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended. The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct or its designee. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil penalties and criminal sanctions (*See* 5 U.S.C. app. 4, §104 and 18 U.S.C. §1001)

SIGNATURE OF REPORTING INDIVIDUAL

Eni Faleomavaega

DATE (Month/Day/Year)
May 14, 1998

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Name Eni F.H. Faleomavaega	Page 2 of 4

SCHEDULE I — EARNED INCOME

List the source, type, and amount of earned income from any source (other than the filer's current employment by the U.S. Government) totalling $200 or more during the preceding calendar year. For a spouse, list the source and amount of any honoraria; list only the source for other spouse earned income exceeding $1,000.

	Source	Type	Amount
Examples	Keene State	Approved Teaching Fee	$6,000
	State of Maryland	Legislative Pension	$9,000
	Civil War Roundtable (Oct 2nd)	Spouse Speech	$1,000
	Ontario County Board of Education	Spouse Salary	NA
	Continental Airlines	Spouse Salary	NA

For payments to charity in lieu of honoraria, use Schedule II.

SCHEDULE III — ASSETS AND "UNEARNED" INCOME

BLOCK A — Asset and/or Income Source

Identify (a) each asset held for investment or production of income with a fair market value exceeding $1,000 at the end of the reporting year, and (b) any other asset or source of income which generated more than $200 in "unearned" income during the year. For rental property or land, provide an address. Provide full names of any mutual funds. For an IRA or retirement plan that is *self-directed*, list the underlying assets worth more than $1,000. For an IRA or retirement plan that is not selfdirected, name the institution holding the account.

Exclude: Your personal residence(s) (unless there is rental income), any debt owed to you by your spouse, or by your or your spouse's child, parent, or sibling; any deposits totalling $5,000 or less in personal savings accounts, any financial interests in or income derived from U.S. Government retirement programs

If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC) or is jointly held (JT), in the optional column on the far left

BLOCK B — Value of Asset

at close of reporting year
If you use a valuation method other than fair market value, please specify the method used
If an asset was sold and is included only because it generated income, the value should be "None"

BLOCK C — Type of Income

BLOCK D — Amount of Income

For IRA's and retirement plans that are *not* self-directed, you may write in "NA" for income

BLOCK E — Transaction

Indicate if asset was purchased (P), sold (S), or exchanged (E) in reporting year

	BLOCK A	BLOCK B												BLOCK C							BLOCK D											BLOCK E
		A None	B $1 – $1,000	C $1,001 – $15,000		E $15,001 – $50,000	F $50,001 – $100,000	G $100,001 – $250,000	H $250,001 – $500,000	I $500,001 – $1,000,000	J $1,000,001 – $5,000,000	K $5,000, 001 – $25,000,000	L $25,000,001 – $50,000,000	Over $50,000,000	DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Type of Income (Specify. For Example: Partnership Income or Farm Income)	I None	II $1 – $200	III $201 – $1,000	IV $1,001 – $2,500	V $2,501 – $5,000	VI $5,001 – $15,000	VII $15,001 – $50,000	VIII $50,001 – $100,000	IX $100,001 – $1,000,000	X $1,000,001 – $5,000,000	XI Over $5,000,000	
SP, DC, JT	*Examples*		Indefinite				X								X		X				Royalties					X			X			P
								X																								
SP	IDS American Express (Accounts) Minneapolis, Minnesota							X							X		X	X								X						

For additional assets and unearned income, use next page.

SCHEDULE VII —TRAVEL PAYMENTS AND REIMBURSEMENTS

Identify the source and list travel itinerary, dates, and nature of expenses provided for travel and travel-related expenses totalling more than $250 received by you, your spouse, or a dependent child during the reporting period. Indicate whether a family member accompanied the traveler at the sponsor's expense, and the amount of time, if any, that was not at the sponsor's expense. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor.

Exclude: Travel-related expenses provided by federal, state, and local governments, or by a foreign government required to be separately reported under the Foreign Gifts and Decorations Act (5 U.S.C. § 7342); travel paid for by a Federal political committee; travel provided to a spouse or dependent child that is totally independent of his or her relationship to you.

Source	Date(s)	Point of Departure—Destination—Point of Return	Lodging? (Y/N)	Food? (Y/N)	Was a Family Member Included? (Y/N)	Any time not at sponsor's expense
Examples: Chicago Chamber of Commerce	Mar. 2	Wash , D.C —Chicago—Wash., D.C	N	N	N	N
Roycroft Corporation	Aug. 6–13	Wash., D.C.—Los Angeles—Cleveland	Y	Y	Y	4 Days
The Brookings Institution	Aug 23-29	Wash DC - Tokyo - Awashima - Wash DC	Y	Y	Y	None
Samoan American Community Services	May 22-25	Wash DC - Los Angeles-Seattle - Wash DC	Y	Y	N	None
San Pasqual Band of Indians	May 4 - 9	Honolulu - San Diego - Los Angeles	N	N	N	4 days

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UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1997

FORM A

For use by Members, officers, and employees

98 MAY 15 AM 11:45

SAM FARR
1117 LONGWORTH HOUSE OFFICE BUILDING
WASHINGTON, DC 20515 202/225-2861

(Full Name)
(Business Address)

MC (8)

HAND DELIVERED

Filer Status: [X] Member of the U.S. House of Representatives — State CA, District 17 — [ ] Officer or Employee — Employing Office

Report Type: [X] Annual (May 15) — [ ] Amendment — [ ] Termination — Termination Date:

A *$200 penalty* shall be assessed against anyone who files more than 30 days late.

PRELIMINARY INFORMATION — ANSWER EACH OF THESE QUESTIONS

I. Did you or your spouse have "earned" income (e.g., salaries or fees) of $200 or more from any source in the reporting period? **If yes, complete and attach Schedule I** — Yes [X] No [ ]

II. Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? **If yes, complete and attach Schedule II** — Yes [ ] No [X]

III. Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? **If yes, complete and attach Schedule III** — Yes [X] No [ ]

IV. Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset worth more than $1,000 in the reporting period? **If yes, complete and attach Schedule IV.** — Yes [X] No [ ]

V. Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? **If yes, complete and attach Schedule V.** — Yes [ ] No [X]

VI. Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $250 and not otherwise exempt)? **If yes, complete and attach Schedule VI.** — Yes [ ] No [X]

VII. Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $250 from one source)? **If yes, complete and attach Schedule VII** — Yes [X] No [ ]

VIII. Did you hold any reportable positions on or before the date of filing in the current calendar year? **If yes, complete and attach Schedule VIII.** — Yes [ ] No [X]

IX. Did you have any reportable agreement or arrangement with an outside entity? **If yes, complete and attach Schedule IX.** — Yes [ ] No [X]

Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION — ANSWER EACH OF THESE QUESTIONS

TRUSTS— Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child? — Yes [ ] No [X]

EXEMPTION— Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption? — Yes [ ] No [X]

CERTIFICATION — THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended. The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct or its designee. Any individual who knowingly and willfully falsifies or who knowingly and willfully fails to file this report may be subject to civil penalties and criminal sanctions (*See* 5 U.S.C. app. 4, §104 and 18 U.S.C. §1001)

SIGNATURE OF REPORTING INDIVIDUAL: Sam Farr — DATE (Month/Day/Year): 5-14-98

1150

SCHEDULE I — EARNED INCOME

List the source, type, and amount of earned income from any source (other than the filer's current employment by the U.S. Government) totalling $200 or more during the preceding calendar year. For a spouse, list the source and amount of any honoraria; list only the source for other spouse earned income exceeding $1,000.

	Source	Type	Amount
Examples.	Keene State	Approved Teaching Fee	$6,000
	State of Maryland	Legislative Pension	$9,000
	Civil War Roundtable (Oct. 2nd)	Spouse Speech	$1,000
	Ontario County Board of Education	Spouse Salary	NA
	Financial Transitions Institute (Hospice of Monterey)	Spouse's Income	N/A

For payments to charity in lieu of honoraria, use Schedule II.

SCHEDULE III — ASSETS AND "UNEARNED" INCOME

BLOCK A — Asset and/or Income Source

Identify (a) each asset held for investment or production of income with a fair market value exceeding $1,000 at the end of the reporting year, and (b) any other asset or source of income which generated more than $200 in "unearned" income during the year. For rental property or land, provide an address. Provide full names of any mutual funds. For an IRA or retirement plan that is *self-directed*, list the underlying assets worth more than $1,000. For an IRA or retirement plan that is not selfdirected, name the institution holding the account.

Exclude: Your personal residence(s) (unless there is rental income), any debt owed to you by your spouse, or by your or your spouse's child, parent, or sibling; any deposits totalling $5,000 or less in personal savings accounts; any financial interests in or income derived from U.S. Government retirement programs.

If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC) or is jointly held (JT), in the optional column on the far left.

BLOCK B — Value of Asset at close of reporting year. If you use a valuation method other than fair market value, please specify the method used. If an asset was sold and is included only because it generated income, the value should be "None."

BLOCK C — Type of Income

BLOCK D — Amount of Income For IRA's and retirement plans that are *not* self-directed, you may write in "NA" for income.

BLOCK E — Transaction Indicate if asset was purchased (P), sold (S), or exchanged (E) in reporting year.

	BLOCK A		BLOCK B												BLOCK C							BLOCK D										BLOCK E
			A None	B $1 – $1,000	C $1,001 – $15,000	E $15,001 – $50,000	F $50,001 – $100,000	G $100,001 – $250,000	H $250,001 – $500,000	I $500,001 – $1,000,000	J $1,000,001 – $5,000,000	K $5,000,001 – $25,000,000	L $25,000,001 – $50,000,000	Over $50,000,000	DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Type of Income (Specify. For Example, Partnership Income or Farm Income)	I None	II $1 – $200	III $201 – $1,000	IV $1,001 – $2,500	V $2,501 – $5,000	VI $5,001 – $15,000	VII $15,001 – $50,000	VIII $50,001 – $100,000	IX $100,001 – $1,000,000	X $1,000,001 – $5,000,000	XI Over $5,000,000	P, S, E
SP		SP																														
DC	*Examples:*					X									X										X				X			P
JT				Indefinite				X								X					Royalties					X						
	Chevy Chase Land. Co.					X									X										X							
	Devil's Flat Association (Big Sur)				X																	X										
	Pt. 16, Big Sur, CA							X								X									X							
	Interest in CA State Retirement Sys.					X																X										
	Tahoe Cabin 1529 Washoe Way, CA					X									X										X							
	Sorensen's Resort Ltd. Partnership					X															Partner-ship Income		X									

For additional assets and unearned income, use next page.

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SCHEDULE III — ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Name SAM FARR | Page 4 of 8

SP. DC. JT	BLOCK A Asset and/or Income Source	BLOCK B Year-End Value of Asset A None	B $1 - $1,000	C $1,001 - $15,000	D $15,001 - $50,000	E $50,001 - $100,000	F $100,001 - $250,000	G $250,001 - $500,000	H $500,001 - $1,000,000	I $1,000,001 - $5,000,000	J $5,000,001 - $25,000,000	K $25,000,001 - $50,000,000	L Over $50,000,000	BLOCK C Type of Income DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Type of Income (Specify)	BLOCK D Amount of Income I None	II $1 - $200	III $201 - $1,000	IV $1,001 - $2,500	V $2,501 - $5,000	VI $5,001 - $15,000	VI $15,001 - $50,000	VIII $50,001 - $100,000	IX $100,001 - $1,000,000	X $1,000,001 - $5,000,000	XI Over $5,000,000	BLOCK E Transaction P. S. E
	Lots 2, 9, 10 SE Corner Santa Lucia & Camino Real Carmel, CA							X														X										
	Dean Witter Strategists Fund				X									X									X									
	Bank of America Stock			X										X									X									
	Due to father's death in 1997 and the consequent dissolution of the Janet H. Farr Trust, I acquired the following assets:																															
	Vista Lobos Apts., Carmel CA (20% interest)							X							X												X					
	Boeing Co. Stock				X									X									X									
	Bristol Myers Squibb				X									X									X									
	Chevron Corp. Stock				X									X									X									
	Colgate Palmolive Co.				X									X									X									
	General Electric Co.					X								X										X								
	Hewlett Packard Co.				X									X										X								
	Intel Corp.							X						X								X										
	IBM Corp.				X									X								X										
	Lucent Tech.			X										X								X										
	Merck & Co.				X									X									X									
	Motorola, Inc.				X									X									X									

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SCHEDULE III — ASSETS AND "UNEARNED" INCOME
Continuation Sheet (if needed)

Name SAM FARR Page 5 of 8

SP. DC. JT	BLOCK A Asset and/or Income Source	BLOCK B Year-End Value of Asset: None	A	B	C	D	E	F	G	H	I	J	K	L	BLOCK C Type of Income: DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Type of Income (Specify)	BLOCK D Amount of Income: None	I	II	III	IV	V	VI	VII	VIII	IX	X	XI	BLOCK E Transaction: P. S. E
	Pfizer, Inc.							X							X											X								S
	Schlumberger Ltd.					X										X									X									
	Hartford Fin. Serv. Grp.					X										X									X									
	Washington Mutual, Inc.					X										X									X									
	Waste Management, Inc.					X										X									X									
	AT&T Stock			X															X				X										S
	ITT Corp. Stock			X															X				X										S
	ITT Industries, Inc. Indiana			X															X								X						S

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SCHEDULE IV — TRANSACTIONS

Name SAM FARR

Report any purchase, sale or exchange by you, your spouse, or dependent child during the reporting year of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child, or the purchase or sale of your personal residence, unless it is rented out.

SP, DC, JT	Asset	Type of Transaction: PURCHASE	SALE	EXCHANGE	Date (MO/DAY/YR)	Amount of Transaction: B ($1,001–$15,000)	C ($15,001–$50,000)	D ($50,001–$100,000)	E ($100,001–$250,000)	F ($250,001–$500,000)	G ($500,001–$1,000,000)	H ($1,000,001–$5,000,000)	I ($5,000,001–$25,000,000)	J ($25,000,001–$50,000,000)	K (Over $50,000,000)
SP	*Example:* Mega Corporation Common Stock	X			10-12-97		X								
	AT&T CORPORATION STOCK		X		10-03-97	X									
	ITT CORPORATION STOCK		X		10-03-97	X									
	ITT INDUSTRIES, INC. INDIANA		X		10-03-97	X									

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SCHEDULE V — LIABILITIES

Report liabilities of over $10,000 owed to any one creditor ***at any time*** during the reporting period by you, your spouse, or dependent child. Mark the highest amount owed during the year. **Exclude:** Any mortgage on your personal residence (unless it is rented out), loans secured by automobiles, household furniture, or appliances, and liabilities owed to a spouse, or the child, parent, or sibling of you or your spouse. Report ***revolving charge accounts*** only if the balance at the end of the reporting period exceeded $10,000.

SP, DC, JT	Creditor	Type of Liability	Amount of Liability										
			B $10,001–$15,000	C $15,001–$50,000	D $50,001–$100,000	E $100,001–$250,000	F $250,001–$500,000	G $500,001–$1,000,000	H $1,000,001–$5,000,000	I $5,000,001–$25,000,000	J $25,000,001–$50,000,000	K Over $50,000,000
	Example First Bank of Wilmington, Delaware	Mortgage on 123 Main St., Dover, Del				X						
JT	SUMITOMO BANK OF CALIFORNIA	Mortgage on Home				X						
JT	SUMITOMO BANK OF CALIFORNIA	Equity Loan on Home		X								

SCHEDULE VI — GIFTS

Report the source, a brief description, and the value of all gifts totalling more than $250 received by you, your spouse, or a dependent child from any source during the year.

Exclude: Gifts from relatives, gifts of personal hospitality of an individual, local meals, and gifts to a spouse or dependent child that are totally independent of his or her relationship to you. Gifts with a value of $100 or less need not be added towards the $250 disclosure threshold.

Note: The gift rule (House Rule 51) prohibits gifts except as specifically provided in the rule.

Source	Description	Value
Example Mr. Joseph H. Smith, Anytown, Anystate	Silver Platter (determination on personal friendship received from Committee on Standards)	$270

Use additional sheets if more space is required.

[redacted]

Name SAM FARR | Page 8 of 8

SCHEDULE VII —TRAVEL PAYMENTS AND REIMBURSEMENTS

Identify the source and list travel itinerary, dates, and nature of expenses provided for travel and travel-related expenses totalling more than $250 received by you, your spouse, or a dependent child during the reporting period. Indicate whether a family member accompanied the traveler at the sponsor's expense, and the amount of time, if any, that was not at the sponsor's expense. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor.

Exclude: Travel-related expenses provided by federal, state, and local governments, or by a foreign government required to be separately reported under the Foreign Gifts and Decorations Act (5 U.S.C. § 7342); travel paid for by a Federal political committee; travel provided to a spouse or dependent child that is totally independent of his or her relationship to you.

Source	Date(s)	Point of Departure—Destination—Point of Return	Lodging? (Y/N)	Food? (Y/N)	Was a Family Member Included? (Y/N)	Any time not at sponsor's expense
Examples: Chicago Chamber of Commerce	Mar 2	Wash., D.C.—Chicago—Wash., D.C	N	N	N	N
Roycroft Corporation	Aug. 6–13	Wash, D.C.—Los Angeles—Cleveland	Y	Y	Y	4 Days
The Aspen Institute	March 31 - April 5	Monterey - Lanai - Wash.	Y	Y	Y	1 Day
Congressional Economic Leadership Institute	Nov. 16-23	Monterey - Frankfurt, Bonn, Paris - Monterey	Y	Y	N	N
The Aspen Institute	Mar. 7-9	Wash. - Hershey, PA - Wash.	Y	Y	N	N

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UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1997

Form A
For use by Members, officers, and employees

98 JUN -4 AM 11:43

(5)

Chaka Fattah
(Full Name)

1205 Longworth House Office Building
(Mailing Address)

Washington DC 20515

Daytime Telephone
202-225-4001

HAND DELIVERED
(Office Use Only)

Filer Status [X] Member of the U.S. House of Representatives — State PA, District 02 — [ ] Officer or Employee — Employing Office

Report Type [X] Annual (May 15) — [ ] Amendment — [ ] Termination — Termination Date

A $200 penalty shall be assessed against anyone who files more than 30 days late.

PRELIMINARY INFORMATION -- ANSWER EACH OF THESE QUESTIONS

I. Did you or your spouse have "earned" income (e.g., salaries or fees) of $200 or more from any source in the reporting period?
If yes, complete and attach Schedule I. Yes [X] No [ ]

II. Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period?
If yes, complete and attach Schedule II. Yes [ ] No [X]

III. Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period?
If yes, complete and attach Schedule III. Yes [X] No [ ]

IV. Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset worth more than $1,000 in the reporting period?
If yes, complete and attach Schedule IV. Yes [ ] No [X]

V. Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period?
If yes, complete and attach Schedule V. Yes [ ] No [X]

VI. Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $250 and not otherwise exempt)?
If yes, complete and attach Schedule VI. Yes [ ] No [X]

VII. Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $250 from one source)?
If yes, complete and attach Schedule VII. Yes [X] No [ ]

VIII. Did you hold any reportable positions on or before the date of filing in the current calendar year?
If yes, complete and attach Schedule VIII. Yes [X] No [ ]

IX. Did you have any reportable agreement or arrangement with an outside entity?
If yes, complete and attach Schedule IX. Yes [ ] No [X]

Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION -- ANSWER EACH OF THESE QUESTIONS

TRUSTS - Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child? (See Instructions, pages 10-11.) Yes [ ] No [X]

EXEMPTION Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption? (See Instructions, page 11.) Yes [ ] No [X]

CERTIFICATION -- THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended. The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct or its designee. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil penalties and criminal sanctions (See 5 U.S.C. app. 4 104 and 18 U.S.C. 1001).

SIGNATURE OF REPORTING INDIVIDUAL Chaka Fattah

DATE (Month/Day/Year) 6/4/98

1158

Name Chaka Fattah	Page 4 of 5

SCHEDULE I -- EARNED INCOME

List the source, type, and amount of earned income from any source (other than the filer's current employment by the U.S. Government) totalling $200 or more during the preceding calendar year. For a spouse, list the source and amount of any honoraria, list only the source for other spouse earned income exceeding $1,000. For further information, see instructions, pages 12-13

	Source	Type	Amount
	Keene State	Approved Teaching Fee	$10,000
	State of Maryland	Legislative Pension	$9,000
Examples	Civil War Roundtable (Oct. 2nd)	Spouse Speech	$1,000
	Ontario County Board of Education	Spouse Salary	NA
	Law Office of Patricia M. Renfroe	Spouse's Salary	NA

For payments to charity in lieu of honoraria, use Schedule II.

SCHEDULE III -- ASSETS AND "UNEARNED" INCOME

BLOCK A **Asset and/or Income Source** Identify (a) each asset held for investment or production of income with a fair market value exceeding $1,000 at the end of the reporting year, and (b) any other asset or source of income which generated more than $200 in "unearned" income during the year. For rental property or land, provide an address. Provide full names of any mutual funds. For an IRA or retirement plan that is *self-directed*, list the underlying assets worth more than $1,000. For an IRA or retirement plan that is *not* self-directed, name the institution holding the account. **Exclude:** Your personal residence(s) (unless there is rental income), any debt owed to you by your spouse, or by your or your spouse's child, parent, or sibling, any deposits totalling $5,000 or less in personal savings accounts; any financial interests in or income derived from U.S. Government retirement programs. If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC) or is jointly held (JT), in the optional column on the far left. For further information, see Instructions, pages 14-20.	BLOCK B **Value of Asset** at close of reporting year If you use a valuation method other than fair market value, please specify the method used If an asset was sold and is included only because it generated income, the value should be "None."	BLOCK C **Type of Income** If other than one of the listed categories, specify the type of income by writing a brief description in this block	BLOCK D **Amount of Income** For IRA's and retirement plans that are *not* self-directed, you may write in "NA" for income	BLOCK E **Transaction** Indicate if asset was purchased(P), sold(S), or exchanged(E) in reporting year
SP DC *Examples* JT	$15,001 - $50,000 $250,001 - $500,000 $50,001 - $100,000	Dividends Rent Interest	$201 - $1,000 $1,001 - $2,500 $5,001 - $15,000	P
SP Mega Corp. Stock SP 123 Main St., Dover, Del 1st Bank of Paducah, KY accounts				
SP PNC Bank, IRA, P. O. Box 535230, Pittsburg, PA 15253	$15,001 - $50,000	Interest	NA	NA
SP PNC Bank Savings Account, P. O. Box 7618FC, Philadelphia, PA 19101	$15,001 - $50,000	Interest	$1,001 - $2,500	Deposit
State Employee Retirement System	$100,001 - $250,000	Pension	$2,501 - $5,000	NA
SP Corestates Bank, P. O. Box 7618FC, Philadelphia, PA 19101	$15,001 - $50,000	Interest	$1,001 - $2,500	Deposit

SCHEDULE VII -- TRAVEL PAYMENTS AND REIMBURSEMENTS

Identify the source and list travel itinerary, dates, and nature of expenses provided for travel and travel-related expenses totalling more than $250 received by you, your spouse, or a dependent child during the reporting period. Indicate whether a family member accompanied the traveler at the sponsor's expense, and the amount of time, if any, that was not at the sponsor's expense. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor.

Exclude: Travel-related expenses provided by federal, state and local governments, or by a foreign government required to be separately reported under the Foreign Gifts and Decorations Act (5 U.S.C. 7342); travel paid for by a Federal political committee; travel provided to a spouse or dependent child that is totally independent of his or her relationship to you. For further information, see Instructions, pages 24-26.

Source	Date(s)	Point of Departure--Destination--Point of Return	Lodging? (Y/N)	Food? (Y/N)	Was a Family Member Included? (Y/N)	Any time not at sponsor's expense
Examples Chicago Chamber of Commerce	Mar 2	Wash., D.C.-Chicago-Wash., D.C.	N	N	N	N
Mega Corporation	Aug 6-13	Wash., D.C.-Los Angeles-Cleveland	Y	Y	Y	4 Days
Aspen Institute	March 7-9, 1997	Washington, DC - Hershey, PA - Washington, DC	Y	Y	N	None

SCHEDULE VIII -- POSITIONS

Report all positions, compensated or uncompensated, held during the current calendar year as an officer, director, trustee of an organization, partner, proprietor, representative, employee, or consultant of any corporation, firm, partnership, or other business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States. For further information, see Instructions, page 26.

Exclude: Positions held in any religious, social, fraternal, or political entities, positions solely of an honorary nature, and positions listed on Schedule I.

Position	Organization
Board Member	Center for Human Advancement
Board Member	Philadelphia Urban League

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1997

FORM A
For use by Members, officers, and employees

RECEIVED
LEGISLATIVE RESOURCE CENTER
98 MAY -8 AM 10:09
OFFICE OF THE CLERK
U.S. HOUSE OF REPRESENTATIVES
INSIDE MAIL
(Office Use Only)

(9)

HARRIS W. FAWELL
444 SOUTH SLEIGHT STREET
NAPERVILLE, IL 60540

(Full Name)
(Mailing Address)
202-225-3515
Daytime Telephone

Filer Status
[X] Member of the U.S. House of Representatives — State IL District 13
[ ] Officer or Employee — Employing Office

Report Type
[X] Annual (May 15)
[ ] Amendment
[ ] Termination — Termination Date

A *$200 penalty* shall be assessed against anyone who files more than 30 days late.

PRELIMINARY INFORMATION — ANSWER EACH OF THESE QUESTIONS

I Did you or your spouse have "earned" income (e.g., salaries or fees) of $200 or more from any source in the reporting period? **If yes, complete and attach Schedule I.** — Yes [X] No [ ]

II Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? **If yes, complete and attach Schedule II.** — Yes [ ] No [X]

III Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? **If yes, complete and attach Schedule III.** — Yes [X] No [ ]

IV Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset worth more than $1,000 in the reporting period? **If yes, complete and attach Schedule IV.** — Yes [X] No [ ]

V Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? **If yes, complete and attach Schedule V.** — Yes [X] No [ ]

VI Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $250 and not otherwise exempt)? **If yes, complete and attach Schedule VI.** — Yes [ ] No [X]

VII Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $250 from one source)? **If yes, complete and attach Schedule VII.** — Yes [X] No [ ]

VIII Did you hold any reportable positions on or before the date of filing in the current calendar year? **If yes, complete and attach Schedule VIII.** — Yes [X] No [ ]

IX Did you have any reportable agreement or arrangement with an outside entity? **If yes, complete and attach Schedule IX.** — Yes [ ] No [X]

Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.

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EXEMPTION—Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption? — Yes [ ] No [X]

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This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended. The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct or its designee. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil penalties and criminal sanctions (*See* 5 U.S.C. app. 4, §104 and 18 U.S.C. §1001)

SIGNATURE OF REPORTING INDIVIDUAL: H.W. Fawell

DATE (Month/Day/Year): May 7, 1998

SCHEDULE I — EARNED INCOME

List the source, type, and amount of earned income from any source (other than the filer's current employment by the U.S. Government) totalling $200 or more during the preceding calendar year. For a spouse, list the source and amount of any honoraria, list only the source for other spouse earned income exceeding $1,000.

Source	Type	Amount
Examples Keene State	Approved Teaching Fee	$6,000
Examples State of Maryland	Legislative Pension	$9,000
Examples Civil War Roundtable (Oct. 2nd)	Spouse Speech	$1,000
Examples Ontario County Board of Education	Spouse Salary	NA
STATE OF ILLINOIS	PENSION	$20,876
STATE OF ILLINOIS TEACHER FUND	NA	NA

For payments to charity in lieu of honoraria, use Schedule II.

Name HARRIS W. FAWELL | Page 5 of 9

SCHEDULE III — ASSETS AND "UNEARNED" INCOME

BLOCK A — Asset and/or Income Source

Identify (a) each asset held for investment or production of income with a fair market value exceeding $1,000 at the end of the reporting year, and (b) any other asset or source of income which generated more than $200 in "unearned" income during the year. For rental property or land, provide an address. Provide full names of any mutual funds. For an IRA or retirement plan that is *self-directed*, list the underlying assets worth more than $1,000. For an IRA or retirement plan that is not self-directed, name the institution holding the account.

Exclude: Your personal residence(s) (unless there is rental income), any debt owed to you by your spouse, or by your or your spouse's child, parent, or sibling, any deposits totalling $5,000 or less in personal savings accounts, any financial interests in or income derived from U.S. Government retirement programs.

If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC) or is jointly held (JT), in the optional column on the far left.

BLOCK B — Value of Asset (at close of reporting year. If you use a valuation method other than fair market value, please specify the method used. If an asset was sold and is included only because it generated income, the value should be "None.")

BLOCK C — Type of Income

BLOCK D — Amount of Income (For IRA's and retirement plans that are *not* self-directed, you may write in "NA" for income)

BLOCK E — Transaction (Indicate if asset was purchased (P), sold (S), or exchanged (E) in reporting year.)

	BLOCK A	B: A None	B: B $1 – $1,000	B: C $1,001 – $15,000	B: D $15,001 – $50,000	B: E $50,001 – $100,000	B: F $100,001 – $250,000	B: G $250,001 – $500,000	B: H $500,001 – $1,000,000	B: I $1,000,001 – $5,000,000	B: J $5,000,001 – $25,000,000	B: K $25,000,001 – $50,000,000	B: L Over $50,000,000	C: DIVIDENDS	C: RENT	C: INTEREST	C: CAPITAL GAINS	C: EXCEPTED TRUST	C: QUALIFIED BLIND TRUST	C: Other Type of Income (Specify. For Example: Partnership Income or Farm Income)	D: I None	D: II $1 – $200	D: III $201 – $1,000	D: IV $1,001 – $2,500	D: V $2,501 – $5,000	D: VI $5,001 – $15,000	D: VII $15,001 – $50,000	D: VIII $50,001 – $100,000	D: IX $100,001 – $1,000,000	D: X $1,000,001 – $5,000,000	D: XI Over $5,000,000	E
SP																															P, S, E
DC, JT	*Examples*		Indefinite			X	X							X		X				Royalties				X		X			X		P
	First Col. Bank of DuPage County Stock	X												X							X											
	First Chicago NDB Corp. (formerly First Chicago Corp)						X							X										X								
	Harris Bank Naperville IRAs				X											X								X								
	RR Bedford Money Market				X											X							X									
	Harris Bank Naperville Money Market				X											X								X								
	101 N. Washington Office Building (1/3rd Owner)						X								X											X						

For additional assets and unearned income, use next page.

SCHEDULE III — ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Name Harris W. Fawell | Page 4 of 9

SP. DC. JT	BLOCK A Asset and/or Income Source	BLOCK B Year-End Value of Asset: A None	B $1 - $1,000	C $1,001 - $15,000	D $15,001 - $50,000	E $50,001 - $100,000	F $100,001 - $250,000	G $250,001 - $500,000	H $500,001 - $1,000,000	I $1,000,001 - $5,000,000	J $5,000,001 - $25,000,000	K $25,000,001 - $50,000,000	L Over $50,000,000	BLOCK C Type of Income: DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Type of Income (Specify)	BLOCK D Amount of Income: I None	II $1 - $200	III $201 - $1,000	IV $1,001 - $2,500	V $2,501 - $5,000	VI $5,001 - $15,000	VII $15,001 - $50,000	VIII $50,001 - $100,000	IX $100,001 - $1,000,000	X $1,000,001 - $5,000,000	XI Over $5,000,000	BLOCK E Transaction: P, S, E
	171 Venture Office Building (173rd ownership)						X								X												X					
	Beaver Island, MI Real Estate							X													X											
	Harris Bank Naperville Money Market (Spouse)			X												X								X								
	Grunfal and Co (IRA Trust) roll-overTrustee in lieu of State Street Bank Bost. MA and Charles Schwab and Co. previous IRA trustees							X						X		X	X										X					
	Travelers Life Ins. -Spouse retirement tax sheltered annuities							X						X		X	X										X					
	John Alden Life Ins.- Spouse retirement tax sheltered annuity (formerly included under Travelers Life Ins.- tax sheltered annuity)					X								X		X	X								X							
	Naperville Electric Bond			X												X							X									
	Baxter, International			X										X									X									
	Caremark, International			X										X									X									E
	Illinois Health Facility Bond			X												X							X									S
	DuPage County, IL Bond			X												X							X									
	General Electric Common Stock (100 Shares)			X										X									X									
	Nevada State Lake Tahoe Bond			X												X							X									
	Will County Forest Preserve Bond			X												X							X									
	Harris Bank Naperville - CD (Spouse Inheritance)				X												X							X								
	Allegiance Corporation			X										X									X									E
	MedPartners, Inc			X										X									X									E

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SCHEDULE III — ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Name Harris W. Fawell | Page 5 of 9

SP. DC JT	BLOCK A Asset and/or Income Source	BLOCK B Year-End Value of Asset											BLOCK C Type of Income						BLOCK D Amount of Income										BLOCK E Transaction
		A None	B $1 – $1,000	C $1,001 – $15,000	D $15,001 – $50,000	E $50,001 – $100,000	F $100,001 – $250,000	G $250,001 – $500,000	H $500,001 – $1,000,000	I $1,000,001 – $5,000,000	J $5,000,001 – $25,000,000	K $25,000,001 – $50,000,000	L Over $50,000,000	DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Type of Income (Specify)	I None	II $1 – $200	III $201 – $1,000	IV $1,001 – $2,500	V $2,501 – $5,000	VI $5,001 – $15,000	VII $15,001 – $50,000	VIII $50,001 – $100,000	IX $100,001 – $1,000,000	X $1,000,001 – $5,000,000	XI Over $5,000,000	P, S, E
	MidAmerica Bank Spouse retirement CD			X											X						X								
	Calumet City G.O. Bonds				X										X						X								
	Green Bay G.O. Bonds			X											X						X								
	Franklin Federal Mutual Fund				X									X									X							

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SCHEDULE IV — TRANSACTIONS

Name Harris W. Fawell | Page 6 of 9

Report any purchase, sale, or exchange by you, your spouse, or dependent child during the reporting year of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child, or the purchase or sale of your personal residence, unless it is rented out

SP, DC, JT	Asset	Type of Transaction: PURCHASE	SALE	EXCHANGE	Date (MO/DAY/YR)	Amount of Transaction: B $1,001–$15,000	C $15,001–$50,000	D $50,001–$100,000	E $100,001–$250,000	F $250,001–$500,000	G $500,001–$1,000,000	H $1,000,001–$5,000,000	I $5,000,001–$25,000,000	J $25,000,001–$50,000,000	K Over $50,000,000
SP	*Example* Mega Corporation Common Stock	X			10-12-97		X								
	Springfield, IL Water Revenue Bond		X		3-03-97	X									
	Nalco Stock 700 Shares		X		8-04-97		X								
	Calumet City G.O. Bonds	X			3-04-97		X								
	Green Bay, G.O . Bonds	X			5-06-97	X									
	Franklin Federal Mutual Fund 786 Shares	X			8-08-97	X									
	Franklin Federal Mutual Fund 396 Shares	X			9-12-97	X									
	Franklin Federal Mutual Fund 390 Shares	X			12-17-97	X									
	General Electric 50 Shares (Stock Split)				5-9-97	X									

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SCHEDULE V — LIABILITIES

Report liabilities of over $10,000 owed to any one creditor ***at any time*** during the reporting period by you, your spouse, or dependent child. Mark the highest amount owed during the year. **Exclude:** Any mortgage on your personal residence (unless it is rented out), loans secured by automobiles, household furniture, or appliances, and liabilities owed to a spouse, or the child, parent, or sibling of you or your spouse. Report ***revolving charge accounts*** only if the balance at the end of the reporting period exceeded $10,000.

SP, DC, JT	Creditor	Type of Liability	Amount of Liability B ($10,001–$15,000)	C ($15,001–$50,000)	D ($50,001–$100,000)	E ($100,001–$250,000)	F ($250,001–$500,000)	G ($500,001–$1,000,000)	H ($1,000,001–$5,000,000)	I ($5,000,001–$25,000,000)	J ($25,000,001–$50,000,000)	K (Over $50,000,000)
Example	First Bank of Wilmington, Delaware	Mortgage on 123 Main St., Dover, Del.				X						
	Harris Bank Naperville, Naperville, IL	Mortgage on 121 Venture Office building (1/3rd owner)				X						

SCHEDULE VI — GIFTS

Report the source, a brief description, and the value of all gifts totalling more than $250 received by you, your spouse, or a dependent child from any source during the year.

Exclude: Gifts from relatives, gifts of personal hospitality of an individual, local meals, and gifts to a spouse or dependent child that are totally independent of his or her relationship to you. Gifts with a value of $100 or less need not be added towards the $250 disclosure threshold.

Note: The gift rule (House Rule 51) prohibits gifts except as specifically provided in the rule.

Source	Description	Value
Example Mr. Joseph H. Smith, Anytown, Anystate	Silver Platter (determination on personal friendship received from Committee on Standards)	$270

Use additional sheets if more space is required.

Name Harris W. Fawell	Page 8 of 9

SCHEDULE VII —TRAVEL PAYMENTS AND REIMBURSEMENTS

Identify the source and list travel itinerary, dates, and nature of expenses provided for travel and travel-related expenses totalling more than $250 received by you, your spouse, or a dependent child during the reporting period. Indicate whether a family member accompanied the traveler at the sponsor's expense, and the amount of time, if any, that was not at the sponsor's expense. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor.

Exclude: Travel-related expenses provided by federal, state, and local governments, or by a foreign government required to be separately reported under the Foreign Gifts and Decorations Act (5 U.S.C. § 7342); travel paid for by a Federal political committee; travel provided to a spouse or dependent child that is totally independent of his or her relationship to you.

	Source	Date(s)	Point of Departure—Destination—Point of Return	Lodging? (Y/N)	Food? (Y/N)	Was a Family Member Included? (Y/N)	Any time not at sponsor's expense
Examples	Chicago Chamber of Commerce	Mar. 2	Wash., D.C.—Chicago—Wash., D.C.	N	N	N	N
	Roycroft Corporation	Aug. 6–13	Wash., D.C.—Los Angeles—Cleveland	Y	Y	Y	4 Days
	Bipartisan Congressional Retreat at Hershey, PA.	7-9, 1997	Wash., D.C.-Hershey, PA Hershey, PA - Wash. D.C.	Y	Y	Y	N

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SCHEDULE VIII — POSITIONS

Report all positions, compensated or uncompensated, held during the current calendar year as an officer, director, trustee of an organization, partner, proprietor, representative, employee, or consultant of any corporation, firm, partnership, or other business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States

Exclude: Positions held in any religious, social, fraternal, or political entities, positions solely of an honorary nature, and positions listed on Schedule I.

Position	Name of Organization
Board Member	North Central College, Naperville, IL

SCHEDULE IX — AGREEMENTS

Identify the date, parties to, and general terms of any agreement or arrangement with respect to future employment, a leave of absence during the period of government service, continuation or deferral of payments by a former or current employer other than the U.S. Government, or continuing participation in an employee welfare or benefit plan maintained by a former employer.

Date	Parties To	Terms of Agreement

HARRIS W. FAWELL
13TH DISTRICT, ILLINOIS
EDUCATION AND THE WORKFORCE
SUBCOMMITTEES
CHAIRMAN
EMPLOYER EMPLOYEE RELATIONS
WORKFORCE PROTECTIONS
SCIENCE
SUBCOMMITTEE
ENERGY AND ENVIRONMENT

RECEIVED
LEGIS
98 AY 19 AM 9 41

Congress of the United States
House of Representatives
Washington, DC 20515–1313

INSIDE MAIL
2368 RAYBURN HOUSE OFFICE BUILDING
(202) 225-3515
CONGRESSIONAL DISTRICT OFFICE
115 W. 55TH STREET
SUITE 100
CLARENDON HILLS, IL 60514
(630) 655-2052

May 14, 1998

(1)

Ms. Robin H. Carle
Clerk of the House
H154, The Capitol
Washington, D. C. 20515

MC

Dear Ms. Carle:

I'm writing to amend my financial disclosure statement which I filed last week. I inadvertently failed to report a television set I won in a raffle. The estimated value of the television is $350. If you need any further information please do not hesitate to give me a call. Thank you for your help in this matter.

Sincerely,

Harris W. Fawell
Member of Congress

HWF:sg

RECEIVED
98 OCT 18 PM 5:06

HARRIS W. FAWELL
17TH DISTRICT, ILLINOIS
EDUCATION AND THE WORKFORCE
SUBCOMMITTEES
CHAIRMAN
EMPLOYER-EMPLOYEE RELATIONS
WORKFORCE PROTECTIONS
SCIENCE
SUBCOMMITTEE
ENERGY AND ENVIRONMENT

98 JUN 15 AM 10:48

HAND DELIVERED

WASHINGTON OFFICE
2364 RAYBURN HOUSE OFFICE BUILDING
202 225-3515
DISTRICT OFFICE
1 PLAZA
15W N. 55TH STREET
SUITE 109
CLARENDON HILLS, ILLINOIS
630 655 2292

Congress of the United States
House of Representatives
Washington, DC 20515-1313

June 12, 1998

The Clerk, U.S. House of Representatives
Legislative Resource Center
B106 Cannon House Office Building
Washington, DC 20515-6612

Attention: David Laufman
Re: Financial Disclosure Statement - 1997

Dear Mr. Carle:

In accordance with our telephone conversation, I am herewith amending the abovestated Financial Disclosure Statement, as follows:

(1) Schedule III - Assets and "unearned" Income.

(a) The listing of the "Illinois Health Facility Bond" was incorrectly listed in Block A of said Schedule III. Please be advised that this bond was sold during calendar year 1996, as reported in Schedule IV of my Financial Disclosure Statement for 1996.

(b) The list of "Caremark, International" was also incorrectly listed in Block A of said Schedule III. Please be advised that this stock was exchanged for 60 shares in MedPartner, Inc., on 9-5-96, which was reported in Schedule IV of my Financial Disclosure Statement for 1996

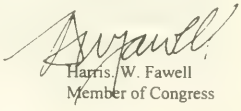
In each of these instances, neither the said bond or the Caremark stock should have been again listed as assets in said Schedule III in my Financial Disclosure Statement for 1997. Accordingly, the "E" designation in Block E relative to Medpartners stock should not have been listed in said Schedule III in the Financial Disclosure Statement for 1997.

Also, the "E" designation in Block E of Allegiance stock should not have been listed in said Schedule III for 1997 in as much as said Allegiance stock constituted spin-off stock distribution to stockholders of Baxter stock and was so reported in Schedule IV in the 1996 Financial Disclosure Statement. No action relative to the Allegiance stock during 1997 occurred.

(2) Inquiry was also made as to the Nalco stock. All of my Nalco stock (700 shares) were sold during 1997, as reported in Schedule IV.

If there are any further inquiries, please feel free to call me. I hope this amendment to my Financial Disclosure Statement for 1996 answers the questions you raised.

Sincerely,



Harris W. Fawell
Member of Congress

HWF:sg

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98 MAY 15 PM 1:10

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1997

Form A
For use by Members, officers, and employees

(9)

VICTOR H. FAZIO, JR.
(Full Name)

2113 Rayburn House Office Building
(Mailing Address)

Washington DC 20515

Daytime Telephone (202) 225-5716

H2 (Office Use Only)

Filer Status	[X] Member of the U.S. House of Representatives	State: CA District: 03	[ ] Officer or Employee	Employing Office	
Report Type	[X] Annual (May 15)	[ ] Amendment		[ ] Termination	Termination Date

A $200 penalty shall be assessed against anyone who files more than 30 days late.

PRELIMINARY INFORMATION -- ANSWER EACH OF THESE QUESTIONS

I. Did you or your spouse have "earned" income (e.g., salaries or fees) of $200 or more from any source in the reporting period? **If yes, complete and attach Schedule I.** Yes [X] No [ ]

II. Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? **If yes, complete and attach Schedule II.** Yes [X] No [ ]

III. Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? **If yes, complete and attach Schedule III.** Yes [X] No [ ]

IV. Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset worth more than $1,000 in the reporting period? **If yes, complete and attach Schedule IV.** Yes [X] No [ ]

V. Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? **If yes, complete and attach Schedule V.** Yes [X] No [ ]

VI. Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $250 and not otherwise exempt)? **If yes, complete and attach Schedule VI.** Yes [ ] No [X]

VII. Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $250 from one source)? **If yes, complete and attach Schedule VII.** Yes [ ] No [X]

VIII. Did you hold any reportable positions on or before the date of filing in the current calendar year? **If yes, complete and attach Schedule VIII.** Yes [X] No [ ]

IX. Did you have any reportable agreement or arrangement with an outside entity? **If yes, complete and attach Schedule IX.** Yes [ ] No [X]

Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION -- ANSWER EACH OF THESE QUESTIONS

TRUSTS- Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child? (See Instructions, pages 10-11.) Yes [ ] No [X]

EXEMPTION. Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption? (See Instructions, page 11.) Yes [ ] No [X]

CERTIFICATION -- THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended. The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct or its designee. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil penalties and criminal sanctions (See 5 U.S.C. app. 4, 104 and 18 U.S.C. 1001)

SIGNATURE OF REPORTING INDIVIDUAL Victor H. Fazio Jr.

DATE (Month/Day/Year) 5/14/98

1175

SCHEDULE I -- EARNED INCOME

List the source, type, and amount of earned income from any source (other than the filer's current employment by the U.S. Government) totalling $200 or more during the preceding calendar year. For a spouse, list the source and amount of any honoraria; list only the source for other spouse earned income exceeding $1,000. For further information, see Instructions, pages 12-13

	Source	Type	Amount
	Keene State	Approved Teaching Fee	$10,000
	State of Maryland	Legislative Pension	$9,000
Examples:	Civil War Roundtable (Oct. 2nd)	Spouse Speech	$1,000
	Ontario County Board of Education	Spouse Salary	NA
	Arter & Hadden	Spouse Salary	NA

For payments to charity in lieu of honoraria, use Schedule II.

SCHEDULE II -- PAYMENTS IN LIEU OF HONORARIA MADE TO CHARITY

List the source, activity (i.e., speech, appearance, or article), date, and amount of any payment made by the sponsor of an event to a charitable organization in lieu of an honorarium.
A separate confidential list of charities receiving such payments must be filed directly with the Committe on Standards of Official Conduct. An envelope for transmitting the list is included in each Member's filing package. For further information, see Instructions, pages 13-14.

Source	Activity	Date	Amount
Examples. Association of American Associations, Wash., D.C.	Speech	Feb. 2, 1994	$2,000
XYZ Magazine	Article	Aug. 13, 1994	$500
The Business Roundtable/Labor Policy Assn	Speech	09/26/97	$ 2,000

SCHEDULE III -- ASSETS AND "UNEARNED" INCOME

BLOCK A **Asset and/or Income Source** Identify (a) each asset held for investment or production of income with a fair market value exceeding $1,000 at the end of the reporting year, and (b) any other asset or source of income which generated more than $200 in "unearned" income during the year. For rental property or land, provide an address. Provide full names of any mutual funds. For an IRA or retirement plan that is *self-directed*, list the underlying assets worth more than $1,000. For an IRA or retirement plan that is *not* self-directed, name the institution holding the account. **Exclude:** Your personal residence(s) (unless there is rental income); any debt owed to you by your spouse, or by your or your spouse's child, parent, or sibling; any deposits totalling $5,000 or less in personal savings accounts; any financial interests in or income derived from U.S. Government retirement programs. If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC) or is jointly held (JT), in the optional column on the far left. For further information, see Instructions, pages 14-20		BLOCK B **Value of Asset** at close of reporting year. If you use a valuation method other than fair market value, please specify the method used. If an asset was sold and is included only because it generated income, the value should be "None."	BLOCK C **Type of Income** If other than one of the listed categories, specify the type of income by writing a brief description in this block.	BLOCK D **Amount of Income** For IRA's and retirement plans that are *not* self-directed, you may write in "NA" for income.	BLOCK E **Transaction** Indicate if asset was purchased(P), sold(S), or exchanged(E) in reporting year.
SP DC JT	*Examples:* SP Mega Corp. Stock SP 123 Main St., Dover, Del. 1st Bank of Paducah, KY accounts	$15,001 - $50,000 $250,001 - $500,000 $50,001 - $100,000	Dividends Rent Interest	$201 - $1,000 $1,001 - $2,500 $5,001 - $15,000	P
	354 Bridge Pl., W. Sacramento, CA	$50,001 - $100,000	Rent	$5,001 - $15,000	
	MLPFS CMA Fund (MM average monthly)	$1,001 - $15,000	Interest	$1,001 - $2,500	
	WNC CA Housing Tax Credits III	$1,001 - $15,000		None - $200	
	AFC Cherokee Housing Partners	$15,001 - $50,000		None - $200	
	LA County M.L. King Hospital Bonds	None - $1,000	Dividends	None - $200	S
	Bakersfield, CA Redevelopment Agency Bonds	None - $1,000	Dividends	$201 - $1,000	S
	SEP/IRA MLPFS (Self):				
	ML Growth Fund for Investment	$1,001 - $15,000	Capital Gains and Dividends	None - $200	
	ML Retirement Reserves	$1,001 - $15,000	Dividends	None - $200	

SCHEDULE III -- ASSETS AND "UNEARNED" INCOME

	Gillette Co	$1,001 - $15,000	Capital Gains and Dividends	None - $200	P
	Aluminum Co of America Bond	$1,001 - $15,000	Interest	None - $200	P
	ML Global Holdings	None - $1,000	Capital Gains and Dividends	None - $200	S
	Alliance Technology Fund	$1,001 - $15,000	Capital Gains and Dividends	None - $200	
	American Capital Emerging Growth Fd (Van Kampen)	$1,001 - $15,000	Capital Gains and Dividends	$201 - $1,000	
	ML Basic Value Fund	$1,001 - $15,000	Capital Gains and Dividends	$201 - $1,000	
	ML Euro Fund	$1,001 - $15,000	Capital Gains and Dividends	None - $200	
	ML Pacific Fund	$1,001 - $15,000	Capital Gains and Dividends	None - $200	P
	ML Special Value Fund	$1,001 - $15,000	Capital Gains and Dividends	None - $200	
	ML Dragon Fund	$1,001 - $15,000	Capital Gains and Dividends	None - $200	
	U.S. Treas. Strips	$15,001 - $50,000		None - $200	
	Resolution Funding Corp	$1,001 - $15,000		None - $200	
	ML Corp Bond Fund	$1,001 - $15,000	Dividends	$201 - $1,000	
	CD Coast Fed. Bank	None - $1,000	Interest	None - $200	S
	CD Bank of America Arizona	$1,001 - $15,000	Interest	$201 - $1,000	
	ML Global Allocation	$1,001 - $15,000	Capital Gains and Dividends	None - $200	P
SP	SEP/IRA MLPFS (Spouse)				
	Alliance Technology Fund	$1,001 - $15,000	Capital Gains and Dividends	None - $200	
	Wisc. Power & Light (Bond)	$1,001 - $15,000	Interest	None - $200	
	ML Basic Value Fund	$1,001 - $15,000	Capital Gains and Dividends	$201 - $1,000	
	ML Special Value Fund	$1,001 - $15,000	Capital Gains and Dividends	None - $200	P
	Ford Motor Credit Co Notes	$1,001 - $15,000	Interest	$201 - $1,000	
	ML Global Holdings	None - $1,000	Capital Gains and Dividends	None - $200	S
	ML Growth Fund for Invest-Retire	$1,001 - $15,000	Capital Gains and Dividends	None - $200	
	ML Dragon Fund	$1,001 - $15,000	Capital Gains and Dividends	None - $200	

SCHEDULE III -- ASSETS AND "UNEARNED" INCOME

	ML Retirement Reserves	$1,001 - $15,000	Dividends	None - $200	
	ML Corp Bond Fund	$1,001 - $15,000	Dividends	$201 - $1,000	
	ML Pacific Fund	$1,001 - $15,000	Capital Gains and Dividends	None - $200	P
	ML Euro Fund	None - $1,000	Capital Gains and Dividends	None - $200	
	American Capital Emerging Growth Fd (Van Kampen)	$1,001 - $15,000	Capital Gains and Dividends	$201 - $1,000	
	U.S. Treas. Strips	$1,001 - $15,000		None - $200	
	Motorola Inc. Stock	$1,001 - $15,000	Capital Gains and Dividends	None - $200	P
SP	Arter & Hadden Retirement Plan	$1,001 - $15,000	Dividends	None - $200	

SCHEDULE IV -- TRANSACTIONS

Report any purchase, sale, or exchange by you, your spouse, or dependent child during the reporting year of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child, or the purchase or sale of your personal residence, unless it is rented out. For further information, see Instructions, pages 20-21.

SP,DC,JT	Asset	Type of Transaction	Date	Amount of Transaction
	Example: Mega Corporation Common Stock	Purchase	10/12/94	$15,001 - $50,000
	Gillette Co. Stock	Purchase	10/31/97	$1,001 - $15,000
	Aluminum Co of America Bond	Purchase	06/13/97	$1,001 - $15,000
	ML Global Holdings	Sold	10/15/97	$1,001 - $15,000
	ML Pacific Fund	Purchase	10/15/97	$1,001 - $15,000
	CD Coast Fed. Bank- Redeemed	Sold	06/10/97	$1,001 - $15,000
	ML Global Allocation	Purchase	10/15/97	$1,001 - $15,000
SP	SEP/IRA (Spouse):			
	ML Special Value Fund	Purchase	10/15/97	$1,001 - $15,000
	ML Global Holdings	Sold	10/15/97	$1,001 - $15,000
	ML Pacific Fund	Purchase	10/15/97	$1,001 - $15,000
	Motorola Inc. Stock	Purchase	10/31/97	$1,001 - $15,000
JT	LA County M.L. King Hospital Bonds - Redeemed	Sold	02/01/97	$1,001 - $15,000
	Bakersfield, CA Redevelopment Agency Bonds - Redeemed	Sold	08/01/97	$15,001 - $50,000

SCHEDULE V -- LIABILITIES

Report liabilities of over $10,000 owed to any one creditor ***at any time*** during the reporting period by you, your spouse, or dependent child. Mark the highest amount owed during the year
Exclude: Any mortgage on your personal residence (unless it is rented out), loans secured by automobiles, household furniture, or appliances; and liabilities owed to a spouse, or the child, parent, or sibling of you or your spouse. Report ***revolving charge accounts*** only if the balance at the end of the reporting period exceeded $10,000. For further information, see Instructions, pages 21-22.

SP,DC,JT	Creditor	Type of Liability	Amount of Liability
	Example: First Bank of Wilmington, Delaware	Mortgage on 123 Main St , Dover, Del	$100,001 - $250,000
	Crossland Mortgage Corp	Mortgage on 354 Bridge Pl , W Sacramento, CA	$15,001 - $50,000

SCHEDULE VIII -- POSITIONS

Report all positions, compensated or uncompensated, held during the current calendar year as an officer, director, trustee of an organization, partner, proprietor, representative, employee, or consultant of any corporation, firm, partnership, or other business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States. For further information, see instructions, page 26.

Exclude: Positions held in any religious, social, fraternal, or political entities; positions solely of an honorary nature; and positions listed on Schedule I.

Position	Organization
Director (uncompensated)	Junior Statesmen Foundation
Director (uncompensated)	National Italian American Foundation

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1997

FORM A
For use by Members, officers, and employees

98 MAY 14 PM 3:38

BOB FILNER
(Full Name)
330 CANNON HOUSE OFFICE BLDG.
WASHINGTON, DC 20515
(Mailing Address) Daytime Telephone 225-8045

MC
(Office Use Only)

Filer Status: [X] Member of the U.S. House of Representatives; State CA; District 50 [ ] Officer or Employee; Employing Office

Report Type: [X] Annual (May 15) [ ] Amendment [ ] Termination; Termination Date

A *$200 penalty* shall be assessed against anyone who files more than 30 days late.

PRELIMINARY INFORMATION — ANSWER EACH OF THESE QUESTIONS

I. Did you or your spouse have "earned" income (e.g. salaries or fees) of $200 or more from any source in the reporting period? If yes, complete and attach Schedule I — Yes [X] No [ ]

II. Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? If yes, complete and attach Schedule II — Yes [ ] No [X]

III. Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? If yes, complete and attach Schedule III — Yes [X] No [ ]

IV. Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset worth more than $1,000 in the reporting period? If yes, complete and attach Schedule IV — Yes [ ] No [X]

V. Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? If yes, complete and attach Schedule V — Yes [X] No [ ]

VI. Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $250 and not otherwise exempt)? If yes, complete and attach Schedule VI — Yes [ ] No [X]

VII. Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $250 from one source)? If yes, complete and attach Schedule VII — Yes [X] No [ ]

VIII. Did you hold any reportable positions on or before the date of filing in the current calendar year? If yes, complete and attach Schedule VIII — Yes [ ] No [X]

IX. Did you have any reportable agreement or arrangement with an outside entity? If yes, complete and attach Schedule IX — Yes [ ] No [X]

Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION — ANSWER EACH OF THESE QUESTIONS

TRUSTS—Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child? Yes [ ] No [X]

EXEMPTION—Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption? Yes [ ] No [X]

CERTIFICATION — THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended. The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct or its designee. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil penalties and criminal sanctions (*See* 5 U.S.C. app. 4, §104 and 18 U.S.C. §1001).

SIGNATURE OF REPORTING INDIVIDUAL: Bob Filner

DATE (Month/Day/Year): May 13, 1998

1184

Name BOB FILNER	Page 2 of 7

SCHEDULE I — EARNED INCOME

List the source, type, and amount of earned income from any source (other than the filer's current employment by the U S Government) totalling $200 or more during the preceding calendar year. For a spouse, list the source and amount of any honoraria; list only the source for other spouse earned income exceeding $1,000

Source	Type	Amount
Examples Keene State	Approved Teaching Fee	$6,000
State of Maryland	Legislative Pension	$9,000
Civil War Roundtable (Oct. 2nd)	Spouse Speech	$1,000
Ontario County Board of Education	Spouse Salary	NA
SELF-EMPLOYED CONSULTANT	SPOUSE SALARY	NA
PUBLIC EMPLOYEES RETIREMENT SYSTEM	PENSION	$10,830.

For payments to charity in lieu of honoraria, use Schedule II.

Name *Bob Filner* Page *3* of *7*

SCHEDULE III — ASSETS AND "UNEARNED" INCOME

BLOCK A

Asset and/or Income Source

Identify (a) each asset held for investment or production of income with a fair market value exceeding $1,000 at the end of the reporting year, and (b) any other asset or source of income which generated more than $200 in "unearned" income during the year. For rental property or land, provide an address. Provide full names of any mutual funds. For an IRA or retirement plan that is *self directed*, list the underlying assets worth more than $1,000. For an IRA or retirement plan that is not selfdirected, name the institution holding the account.

Exclude: Your personal residence(s) (unless there is rental income), any debt owed to you by your spouse, or by your or your spouse's child, parent, or sibling, any deposits totalling $5,000 or less in personal savings accounts, any financial interests in or income derived from U.S. Government retirement programs.

If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC) or is jointly held (JT), in the optional column on the far left.

BLOCK B

Value of Asset

at close of reporting year. If you use a valuation method other than fair market value, please specify the method used. If an asset was sold and is included only because it generated income, the value should be "None."

BLOCK C

Type of Income

BLOCK D

Amount of Income

For IRA's and retirement plans that are *not* self-directed, you may write in "NA" for income.

BLOCK E

Transaction

Indicate if asset was purchased (P), sold (S), or exchanged (E) in reporting year

Block B — Value of Asset

	Asset and/or Income Source	A None	B $1 – $1,000	C $1,001 – $15,000	D $15,001 – $50,000	E $50,001 – $100,000	F $100,001 – $250,000	G $250,001 – $500,000	H $500,001 – $1,000,000	I $1,000,001 – $5,000,000	J $5,000,001 – $25,000,000	K $25,000,001 – $50,000,000	L Over $50,000,000
SP,	Examples: SP Mega Corp. Stock					X							
DC	Examples: Simon & Schuster		Indefinite										
JT	Examples: 1st Bank of Paducah, KY accounts						X						
	CMA Money Fund (Merrill Lynch)			X									
	Guardian Mutual Fund (Neuberger & Berman)			X									

Block C — Type of Income

Asset and/or Income Source	DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Type of Income (Specify For Example Partnership Income or Farm Income)
SP Mega Corp. Stock	X						
Simon & Schuster							Royalties
1st Bank of Paducah, KY accounts			X				
CMA Money Fund (Merrill Lynch)	X						
Guardian Mutual Fund (Neuberger & Berman)	X			X			

Block D — Amount of Income; Block E — Transaction

Asset and/or Income Source	I None	II $1 – $200	III $201 – $1,000	IV $1,001 – $2,500	V $2,501 – $5,000	VI $5,001 – $15,000	VII $15,001 – $50,000	VIII $50,001 – $100,000	IX $100,001 – $1,000,000	X $1,000,001 – $5,000,000	XI Over $5,000,000	Transaction
SP Mega Corp. Stock				X								P
Simon & Schuster									X			S
1st Bank of Paducah, KY accounts						X						E
CMA Money Fund (Merrill Lynch)			X									
Guardian Mutual Fund (Neuberger & Berman)				X								

For additional assets and unearned income, use next page

SCHEDULE III — ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Name BOB FILNER | Page 4 of 7

SP DC JT	BLOCK A Asset and/or Income Source	BLOCK B Year-End Value of Asset											BLOCK C Type of Income						BLOCK D Amount of Income										BLOCK E Transaction
		A None	B $1 – $1,000	C $1,001 – $15,000	D $15,001 – $50,000	E $50,001 – $100,000	F $100,001 – $250,000	G $250,001 – $500,000	H $500,001 – $1,000,000	I $1,000,001 – $5,000,000	J $5,000,001 – $25,000,000	K $25,000,001 – $50,000,000	L Over $50,000,000	DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Type of Income (Specify)	I None	II $1 – $200	III $201 – $1,000	IV $1,001 – $2,500	V $2,501 – $5,000	VI $5,001 – $15,000	VII $15,001 – $50,000	VIII $50,001 – $100,000	IX $100,001 – $1,000,000	X $1,000,001 – $5,000,000	XI Over $5,000,000	P, S, E
	ML TECHNOLOGY VENTURES		X													X	X					X								
	NATL HEALTH INSR CO-#1			X												X						X								
	NUVEEN CA. TAX-FREE FUND							X						X											X						
	OCTUS, INC.			X										X							X										
	SAN DIEGANS of Bob Filner					X										(N/A)					X										
	USE CREDIT UNION			X												X							X								

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SCHEDULE III — ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Name BOB FILNER | Page 5 of 7

SP DC JT	BLOCK A Asset and/or Income Source	BLOCK B Year-End Value of Asset: A None	B $1 – $1,000	C $1,001 – $15,000	D $15,001 – $50,000	E $50,001 – $100,000	F $100,001 – $250,000	G $250,001 – $500,000	H $500,001 – $1,000,000	I $1,000,001 – $5,000,000	J $5,000,001 – $25,000,000	K $25,000,001 – $50,000,000	L Over $50,000,000	BLOCK C Type of Income: DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Type of Income (Specify)	BLOCK D Amount of Income: I None	II $1 – $200	III $201 – $1,000	IV $1,001 – $2,500	V $2,501 – $5,000	VI $5,001 – $15,000	VII $15,001 – $50,000	VIII $50,001 – $100,000	IX $100,001 – $1,000,000	X $1,000,001 – $5,000,000	XI Over $5,000,000	BLOCK E Transaction: P S E
	BANK of AMERICA (CHECKING)		X													X							X									
	CONGRESSIONAL FCU			X												X							X									
	L.A. COUNTY SANIT. BONDS			X												X								X								
	ML IRA				X									X			X								X							
	S.D. COUNTY CTFS - 2001			X												X								X								
	CALIFORNIA ST. BOND				X											X									X							
	S.D. COUNTY CTFS - 2004				X											X									X							
	CALIF. HLTH. FCS BOND				X											X								X								
	NAT'L HEALTH INSUR CO. - #2						X									X									X							

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Name BOB FILNER | Page 6 of 7

SCHEDULE V — LIABILITIES

Report liabilities of over $10,000 owed to any one creditor ***at any time*** during the reporting period by you, your spouse, or dependent child. Mark the highest amount owed during the year. **Exclude:** Any mortgage on your personal residence (unless it is rented out), loans secured by automobiles, household furniture, or appliances, and liabilities owed to a spouse, or the child, parent, or sibling of you or your spouse. Report ***revolving charge accounts*** only if the balance at the end of the reporting period exceeded $10,000.

SP, DC, JT	Creditor	Type of Liability	Amount of Liability									
			B $10,001 – $15,000	C $15,001 – $50,000	D $50,001 – $100,000	E $100,001 – $250,000	F $250,001 – $500,000	G $500,001 – $1,000,000	H $1,000,001 – $5,000,000	I $5,000,001 – $25,000,000	J $25,000,001 – $50,000,000	K Over $50,000,000
Example	*First Bank of Wilmington, Delaware*	*Mortgage on 123 Main St. Dover, Del*				x						
	SAN DIEGO NATIONAL BANK	PERSONAL LOAN			X							

SCHEDULE VI — GIFTS

Report the source, a brief description, and the value of all gifts totalling more than $250 received by you, your spouse, or a dependent child from any source during the year.

Exclude: Gifts from relatives, gifts of personal hospitality of an individual, local meals, and gifts to a spouse or dependent child that are totally independent of his or her relationship to you. Gifts with a value of $100 or less need not be added towards the $250 disclosure threshold.

Note: The gift rule (House Rule 51) prohibits gifts except as specifically provided in the rule.

Source	Description	Value
Example Mr. Joseph H. Smith, Anytown, Anystate	Silver Platter (determination on personal friendship received from Committee on Standards)	$270
	NA	

Use additional sheets if more space is required.

Name BOB FILNER | Page 7 of 7

SCHEDULE VII —TRAVEL PAYMENTS AND REIMBURSEMENTS

Identify the source and list travel itinerary, dates, and nature of expenses provided for travel and travel-related expenses totaling more than $250 received by you, your spouse, or a dependent child during the reporting period. Indicate whether a family member accompanied the traveler at the sponsor's expense, and the amount of time, if any, that was not at the sponsor's expense. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor.

Exclude: Travel related expenses provided by federal, state, and local governments, or by a foreign government required to be separately reported under the Foreign Gifts and Decorations Act (5 U.S.C. § 7342); travel paid for by a Federal political committee; travel provided to a spouse or dependent child that is totally independent of his or her relationship to you.

Source	Date(s)	Point of Departure—Destination—Point of Return	Lodging? (Y/N)	Food? (Y/N)	Was a Family Member Included? (Y/N)	Any time not at sponsor's expense
Examples: Chicago Chamber of Commerce	Mar. 2	Wash., D.C.—Chicago—Wash., D.C.	N	N	N	N
Roycroft Corporation	Aug. 6–13	Wash., D.C.—Los Angeles—Cleveland	Y	Y	Y	4 Days
ASPEN INSTITUTE -- BIPARTISAN CONG. RETREAT	MAR 7-9	WASH, DC — HERSHEY, PA — WASH, DC	Y	Y	Y	N
SONS & DAUGHTERS OF PHILIPPINO VETERANS	APR 4-10	WASH, DC — MANILLA, PHILIPANES — WASH, DC	Y	Y	Y	N
CENTRAL BOARD of JEWISH COMMUNITIES IN GREECE	NOV 21-27	WASH, DC — ATHENS, GREECE — WASH, DC	Y	Y	Y	1 DAY

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UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1997

FORM A
For use by Members, officers, and employees

(9)

MARK ADAM FOLEY
(Full Name)

3507 Village Blvd #304 West Palm Beach, Fl 33409 561/627-6192
(Mailing Address) Daytime Telephone

(Office Use Only)

Filer Status
[X] Member of the U S House of Representatives — State FL District 16
[ ] Officer or Employee — Employing Office

Report Type
[X] Annual (May 15)
[ ] Amendment
[ ] Termination — Termination Date

A *$200 penalty* shall be assessed against anyone who files more than 30 days late.

PRELIMINARY INFORMATION — ANSWER EACH OF THESE QUESTIONS

I Did you or your spouse have "earned" income (e.g., salaries or fees) of $200 or more from any source in the reporting period?
If yes, complete and attach Schedule I. Yes [ ] No [X]

II. Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period?
If yes, complete and attach Schedule II. Yes [X] No [ ]

III Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period?
If yes, complete and attach Schedule III. Yes [X] No [ ]

IV Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset worth more than $1,000 in the reporting period?
If yes, complete and attach Schedule IV. Yes [X] No [ ]

V Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period?
If yes, complete and attach Schedule V. Yes [X] No [ ]

VI Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $250 and not otherwise exempt)?
If yes, complete and attach Schedule VI. Yes [ ] No [X]

VII Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $250 from one source)?
If yes, complete and attach Schedule VII. Yes [X] No [ ]

VIII Did you hold any reportable positions on or before the date of filing in the current calendar year?
If yes, complete and attach Schedule VIII. Yes [ ] No [X]

IX Did you have any reportable agreement or arrangement with an outside entity?
If yes, complete and attach Schedule IX. Yes [ ] No [X]

Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION — ANSWER EACH OF THESE QUESTIONS

TRUSTS—Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child? Yes [ ] No [X]

EXEMPTION—Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption? Yes [ ] No [X]

CERTIFICATION — THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended. The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct or its designee. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil penalties and criminal sanctions (*See* 5 U.S.C. app. 4, §104 and 18 U.S.C. §1001)

SIGNATURE OF REPORTING INDIVIDUAL — DATE (Month/Day/Year) 5/15/98

1191

Name Mark Foley	Page 2 of 9

SCHEDULE I — EARNED INCOME

List the source, type, and amount of earned income from any source (other than the filer's current employment by the U S Government) totalling $200 or more during the preceding calendar year For a spouse, list the source and amount of any honoraria; list only the source for other spouse earned income exceeding $1,000.

	Source	Type	Amount
Examples	Keene State	Approved Teaching Fee	$6,000
	State of Maryland	Legislative Pension	$9,000
	Civil War Roundtable (Oct 2nd)	Spouse Speech	$1,000
	Ontario County Board of Education	Spouse Salary	NA

For payments to charity in lieu of honoraria, use Schedule II.

Name	Mark Foley	Page	3 of 9

SCHEDULE II — PAYMENTS IN LIEU OF HONORARIA MADE TO CHARITY

List the source, activity (i.e., speech, appearance, or article), date, and amount of any payment made by the sponsor of an event to a charitable organization in lieu of an honorarium. A separate confidential list of charities receiving such payments must be filed directly with the Committee on Standards of Official Conduct. An envelope for transmitting the list is included in each Member's filing package.

Source	Activity	Date	Amount
Examples Association of American Associations, Wash , D C XYZ Magazine	Speech Article	Feb 2, 1997 Aug 13, 1997	$2,000 $500
KMART	Appearance	Sept 10 1997	$500
National Grocers Association	Appearance	Jun 24 1997	$100
Washington Caucus	Speech	Oct 23 1997	$500

This page may be copied if more space is required.

Name Mark Foley | Page 4 of 9

SCHEDULE III — ASSETS AND "UNEARNED" INCOME

BLOCK A — Asset and/or Income Source

Identify (a) each asset held for investment or production of income with a fair market value exceeding $1,000 at the end of the reporting year, and (b) any other asset or source of income which generated more than $200 in "unearned" income during the year. For rental property or land, provide an address. Provide full names of any mutual funds. For an IRA or retirement plan that is *self directed*, list the underlying assets worth more than $1,000. For an IRA or retirement plan that is not self-directed, name the institution holding the account.

Exclude: Your personal residence(s) (unless there is rental income); any debt owed to you by your spouse, or by your or your spouse's child, parent, or sibling; any deposits totalling $5,000 or less in personal savings accounts; any financial interests in or income derived from U.S. Government retirement programs.

If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC) or is jointly held (JT) in the optional column on the far left.

BLOCK B — Value of Asset

at close of reporting year. If you use a valuation method other than fair market value, please specify the method used. If an asset was sold and is included only because it generated income, the value should be "None."

BLOCK C — Type of Income

BLOCK D — Amount of Income

For IRA's and retirement plans that are *not* self-directed, you may write in "NA" for income.

BLOCK E — Transaction

Indicate if asset was purchased (P), sold (S), or exchanged (E) in reporting year.

	BLOCK A	B	C	D	E	F	G	H	I	J	K	L	DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Type of Income (Specify For Example: Partnership Income or Farm Income)	I	II	III	IV	V	VI	VII	VIII	IX	X	XI	BLOCK E
		None	$1 – $1,000	$1,001 – $15,000	$15,001 – $50,000	$50,001 – $100,000	$100,001 – $250,000	$250,001 – $500,000	$500,001 – $1,000,000	$1,000,001 – $5,000,000	$5,000,001 – $25,000,000	$25,000,001 – $50,000,000	Over $50,000,000								None	$1 – $200	$201 – $1,000	$1,001 – $2,500	$2,501 – $5,000	$5,001 – $15,000	$15,001 – $50,000	$50,001 – $100,000	$100,001 – $1,000,000	$1,000,001 – $5,000,000	Over $5,000,000	
SP		SP	Mega Corp Stock										X											X							P
DC	*Examples*		Simon & Schuster																Royalties								X				S, E
JT			1st Bank of Paducah, KY accounts		Indefinite		X								X										X							P
Jt	Apt 118, Hotel Aspen, Aspen, CO					X								X													X				
	257 CV REIT, Inc			X									X									X									
	Smith Barney Money Fund			X									X								X										
	1000 Banyan Hotel Invest VHT			X									X							X											
	200 Televideo Systems		X										X											X							
	Life Insurance Policy				X										X								X								

For additional assets and unearned income, use next page.

SCHEDULE III — ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Name Mark Foley | Page 5 of 9

SP DC JT	BLOCK A Asset and/or Income Source	BLOCK B Year-End Value of Asset												BLOCK C Type of Income						BLOCK D Amount of Income										BLOCK E Transaction
		A None	B $1 – $1,000	C $1,001 – $15,000	D $15,001 – $50,000	E $50,001 – $100,000	F $100,001 – $250,000	G $250,001 – $500,000	H $500,001 – $1,000,000	I $1,000,001 – $5,000,000	J $5,000,001 – $25,000,000	K $25,000,001 – $50,000,000	L Over $50,000,000	DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Type of Income (Specify)	I None	II $1 – $200	III $201 – $1,000	IV $1,001 – $2,500	V $2,501 – $5,000	VI $5,001 – $15,000	VII $15,001 – $50,000	VIII $50,001 – $100,000	IX $100,001 – $1,000,000	X $1,000,001 – $5,000,000	XI Over $5,000,000	P S E
	Stock: Foley-Smith,Inc				X																X										
	Stock: Foley Capital Corp.			X																	X										
	200 Florida Power & Light			X										X									X								
	Wright Patman Credit Union				X											X								X							
	1st Union Checking			X												X						X									
	Alliance Capital				X											X								X							
	John Hancock Life Insurance			X												X					X										
	4000 Novell				X																X										
	700 Sotheby Holdings			X																											
	1000 NSTOR Tech			X																	X										

This page may be copied if more space is required.

SCHEDULE IV — TRANSACTIONS

Name Mark Foley

Report any purchase, sale, or exchange by you, your spouse, or dependent child during the reporting year of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child, or the purchase or sale of your personal residence, unless it is rented out.

SP, DC, JT	Asset	Type of Transaction: PURCHASE	SALE	EXCHANGE	Date (MO/DAY/YR)	Amount of Transaction: B ($1,001–$15,000)	C ($15,001–$50,000)	D ($50,001–$100,000)	E ($100,001–$250,000)	F ($250,001–$500,000)	G ($500,001–$1,000,000)	H ($1,000,001–$5,000,000)	I ($5,000,001–$25,000,000)	J ($25,000,001–$50,000,000)	K (Over $50,000,000)
SP	*Example* Mega Corporation Common Stock	X			10–12–97		X								
	1200 Dycom		X		7-11-97		X								

This page may be copied if more space is required.

SCHEDULE V — LIABILITIES

Report liabilities of over $10,000 owed to any one creditor ***at any time*** during the reporting period by you, your spouse, or dependent child. Mark the highest amount owed during the year. **Exclude:** Any mortgage on your personal residence (unless it is rented out), loans secured by automobiles, household furniture, or appliances, and liabilities owed to a spouse, or the child, parent, or sibling of you or your spouse. Report ***revolving charge accounts*** only if the balance at the end of the reporting period exceeded $10,000.[1]

SP, DC, JT	Creditor	Type of Liability	Amount of Liability									
			B $10,001 – $15,000	C $15,001 – $50,000	D $50,001 – $100,000	E $100,001 – $250,000	F $250,001 – $500,000	G $500,001 – $1,000,000	H $1,000,001 – $5,000,000	I $5,000,001 – $25,000,000	J $25,000,001 – $50,000,000	K Over $50,000,000
Example	*First Bank of Wilmington, Delaware*	*Mortgage on 123 Main St. Dover, Del*				X						
JT	UTE City Mortgage	Mortgage on 118 Hotel Aspen Aspen, CO			X							

SCHEDULE VI — GIFTS

Report the source, a brief description, and the value of all gifts totalling more than $250 received by you, your spouse, or a dependent child from any source during the year.

Exclude: Gifts from relatives, gifts of personal hospitality of an individual, local meals, and gifts to a spouse or dependent child that are totally independent of his or her relationship to you. Gifts with a value of $100 or less need not be added towards the $250 disclosure threshold.

Note: The gift rule (House Rule 51) prohibits gifts except as specifically provided in the rule.

Source	Description	Value
Example Mr. Joseph H. Smith, Anytown, Anystate	Silver Platter (determination on personal friendship received from Committee on Standards)	$270

Use additional sheets if more space is required.

SCHEDULE VII —TRAVEL PAYMENTS AND REIMBURSEMENTS

Identify the source and list travel itinerary, dates, and nature of expenses provided for travel and travel-related expenses totalling more than $250 received by you, your spouse, or a dependent child during the reporting period. Indicate whether a family member accompanied the traveler at the sponsor's expense, and the amount of time, if any, that was not at the sponsor's expense. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor.

Exclude: Travel-related expenses provided by federal, state, and local governments, or by a foreign government required to be separately reported under the Foreign Gifts and Decorations Act (5 U.S.C. § 7342); travel paid for by a Federal political committee; travel provided to a spouse or dependent child that is totally independent of his or her relationship to you.

Source	Date(s)	Point of Departure—Destination—Point of Return	Lodging? (Y/N)	Food? (Y/N)	Was a Family Member Included? (Y/N)	Any time not at sponsor's expense
Examples: Chicago Chamber of Commerce	Mar. 2	Wash., D.C.—Chicago—Wash., D.C	N	N	N	N
Roycroft Corporation	Aug. 6–13	Wash., D.C —Los Angeles—Cleveland	Y	Y	Y	4 Days
Florida Chamber	Feb 13-14	Wash,DC-Orlando-WPB,FL	Y	Y	N	N
United Fresh Fruit & Vegetable Assn.	Feb 22-23	WPB,FL-Orlando-WPB,FL	Y	Y	N	N
The Aspen Institute	Mar 7-8	Wash,DC-Hershey,PA	Y	Y	N	N
The Leeza Gibbons Show (Viacom)	Apr 3-4	Wash,DC-NYC-WPB,FL	Y	N	N	N
Ripon Educational Fund	Aug 9-16	WPB,FL-Prague-London	Y	Y	N	N
American Crop Protection Assn.	Sept 27-28	Wash,DC-Sulphur Springs,WV-Wash,DC	Y	Y	N	N
Colorado Realtors Association	Oct 10-13	Wash,DC-Colorado Springs,CO-Wash,DC	Y	Y	N	N

This page may be copied if more space is required.

SCHEDULE VIII — POSITIONS

Report all positions, compensated or uncompensated, held during the current calendar year as an officer, director, trustee of an organization, partner, proprietor, representative, employee, or consultant of any corporation, firm, partnership, or other business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States.

Exclude: Positions held in any religious, social, fraternal, or political entities; positions solely of an honorary nature, and positions listed on Schedule I.

Position	Name of Organization

SCHEDULE IX — AGREEMENTS

Identify the date, parties to, and general terms of any agreement or arrangement with respect to: future employment, a leave of absence during the period of government service, continuation or deferral of payments by a former or current employer other than the U.S. Government, or continuing participation in an employee welfare or benefit plan maintained by a former employer.

Date	Parties To	Terms of Agreement

GPO: 1998 46-260 (mac)

Use additional sheets if more space is required.

RECEIVED

MARK FOLEY
15TH DISTRICT, FLORIDA
DEPUTY MAJORITY WHIP
TASK FORCE ON IMMIGRATION REFORM
AGRICULTURE COMMITTEE
SUBCOMMITTEES
RISK MANAGEMENT
AND SPECIALTY CROPS
DEPARTMENT OPERATIONS, NUTRITION
AND FOREIGN AGRICULTURE
SCIENCE COMMITTEE
SUBCOMMITTEES
SPACE AND AERONAUTICS
ENERGY AND ENVIRONMENT

98 JUN 11 AM 9:58

HAND DELIVERED

Congress of the United States
House of Representatives
Washington, DC 20515

REPLY TO
113 CANNON BUILDING
WASHINGTON, DC 20515-0916
(202) 225-3792
FAX (202) 225-3132
E-MAIL: mfoley@mail.house.gov
FLORIDA DISTRICT OFFICES
4440 PGA BLVD, SUITE 406
PALM BEACH GARDENS, FL 33410
(561) 627-6192
FAX (561) 625-4719
COUNTY ANNEX BUILDING
250 NW COUNTRY CLUB DRIVE
PORT ST. LUCIE, FL 34986
(561) 878-3755
FAX (561) 871-0551

(3)
√
MC

June 10, 1998

Clerk of the House
B-106 Cannon Building
Washington, D.C. 20515

Dear Madame Clerk:

Attached please find an amendment to my 1997 Financial Disclosure Statement. Please note the name change and transactions that should be included in Schedule IV

Thank you for your assistance. Should you require additional information, please contact me immediately.

Sincerely,

Mark

Mark A. Foley
Member of Congress

MAF/mf

THIS STATIONERY PRINTED ON PAPER MADE OF RECYCLED FIBERS
THIS MAILING WAS PREPARED, PUBLISHED AND MAILED AT TAXPAYER EXPENSE

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1997

FORM A

For use by Members, officers, and employees

98 JUN 11 AM 9:58

MARK ADAM FOLEY

(Full Name)

1507 Village Blvd #304 West Palm Beach, FL 33409 561/627-6192

(Mailing Address) (Daytime Telephone)

HAND DELIVERED

(Office Use Only)

Filer Status	[X] Member of the U.S. House of Representatives	State FL District 16	[ ] Officer or Employee	Employing Office	A *$200 penalty* shall be assessed against anyone who files more than 30 days late.
Report Type	[ ] Annual (May 15)	[X] Amendment	[ ] Termination	Termination Date	

PRELIMINARY INFORMATION — ANSWER EACH OF THESE QUESTIONS

I. Did you or your spouse have "earned" income (e.g., salaries or fees) of $200 or more from any source in the reporting period? If yes, complete and attach Schedule I — Yes [ ] No [X]

II. Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? If yes, complete and attach Schedule II — Yes [X] No [ ]

III. Did you, your spouse, or a dependent child receive unearned income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? If yes, complete and attach Schedule III — Yes [X] No [ ]

IV. Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset worth more than $1,000 in the reporting period? If yes, complete and attach Schedule IV. — Yes [X] No [ ]

V. Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? If yes, complete and attach Schedule V. — Yes [X] No [ ]

VI. Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (e.g., aggregating more than $250 and not otherwise exempt)? If yes, complete and attach Schedule VI — Yes [ ] No [X]

VII. Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $250 from one source)? If yes, complete and attach Schedule VII — Yes [X] No [ ]

VIII. Did you hold any reportable positions on or before the date of filing in the current calendar year? If yes, complete and attach Schedule VIII — Yes [ ] No [X]

IX. Did you have any reportable agreement or arrangement with an outside entity? If yes, complete and attach Schedule IX — Yes [ ] No [X]

Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION — ANSWER EACH OF THESE QUESTIONS

TRUSTS — Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child? — Yes [ ] No [X]

EXEMPTION — Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption? — Yes [ ] No [X]

CERTIFICATION — THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended. The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct or its designee. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil penalties and criminal sanctions (see 5 U.S.C. app. 4 §104 and 18 U.S.C. §1001).

SIGNATURE OF REPORTING INDIVIDUAL — Mark Foley

DATE (Month, Day, Year) — 6/10/98

1201

SCHEDULE IV — TRANSACTIONS

Name MARK FOLEY | Page 6 of 9

SP, DC, JT	Asset	Type of Transaction: PURCHASE	SALE	EXCHANGE	Date (MO/DAY/YR)	Amount of Transaction: B $1,001–$15,000	C $15,001–$50,000	D $50,001–$100,000	E $100,001–$250,000	F $250,001–$500,000	G $500,001–$1,000,000	H $1,000,001–$5,000,000	I $5,000,001–$25,000,000	J $25,000,001–$50,000,000	K Over $50,000,000
SP	*Example* | Mega Corporation Common Stock	X			10-12-97		X								
	Cinsco Private Ledger Corp														
	**Name Change to Alliance Capital														
	Great Western Savings														
	** Account Closed														
	1000 NSTOR Tech	X			7/10/97	X									
	1000 Novell	X			10/10/97	X									
	3000 Novell	X			10/10/97		X								
	200 Sotheby Holdings	X			12/10/97	X									
	500 Sotheby Holdings	X			12/10/97	X									
	100 Great Western Financial		X		5/30/97	X									

Report any purchase, sale, or exchange by you, your spouse, or dependent child during the reporting year of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child, or the purchase or sale of your personal residence, unless it is rented out.

This page may be copied if more space is required

1202

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1997

FORM A
For use by Members, officers, and employees

93 MAY -6 AM 10:53

Michael P. Forbes
(Full Name)

c/o George R. Sullivan, CPA - P.O. Box 500
(Mailing Address)

Southold, New York 11971

Daytime Telephone
516-765-1118

HAND DELIVERED (4)

MC (Office Use Only)

Filer Status	[X] Member of the U.S. House of Representatives	State New York District First	[ ] Officer or Employee	Employing Office	
Report Type	[X] Annual (May 15)	[ ] Amendment	[ ] Termination	Termination Date	

A *$200 penalty* shall be assessed against anyone who files more than 30 days late.

PRELIMINARY INFORMATION — ANSWER EACH OF THESE QUESTIONS

I Did you or your spouse have "earned" income (e.g., salaries or fees) of $200 or more from any source in the reporting period? **If yes, complete and attach Schedule I.** — Yes [X] No [ ]

II Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? **If yes, complete and attach Schedule II.** — Yes [ ] No [X]

III Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? **If yes, complete and attach Schedule III.** — Yes [X] No [ ]

IV Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset worth more than $1,000 in the reporting period? **If yes, complete and attach Schedule IV.** — Yes [ ] No [X]

V Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? **If yes, complete and attach Schedule V.** — Yes [ ] No [X]

VI Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $250 and not otherwise exempt)? **If yes, complete and attach Schedule VI.** — Yes [ ] No [X]

VII Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $250 from one source)? **If yes, complete and attach Schedule VII.** — Yes [ ] No [X]

VIII Did you hold any reportable positions on or before the date of filing in the current calendar year? **If yes, complete and attach Schedule VIII.** — Yes [X] No [ ]

IX Did you have any reportable agreement or arrangement with an outside entity? **If yes, complete and attach Schedule IX.** — Yes [ ] No [X]

Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION — ANSWER EACH OF THESE QUESTIONS

TRUSTS— Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child? — Yes [ ] No [X]

EXEMPTION—Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption? — Yes [ ] No [X]

CERTIFICATION — THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended. The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct or its designee. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil penalties and criminal sanctions (*See* 5 U.S.C. app. 4 §104 and 18 U.S.C. §1001).

SIGNATURE OF REPORTING INDIVIDUAL: Mike Forbes

DATE (Month/Day/Year): 5/5/98

1203

Name Michael P. Forbes	Page 1 of 3

SCHEDULE I — EARNED INCOME

List the source, type, and amount of earned income from any source (other than the filer's current employment by the U.S. Government) totalling $200 or more during the preceding calendar year. For a spouse, list the source and amount of any honoraria; list only the source for other spouse earned income exceeding $1,000.

	Source	Type	Amount
Examples	Keene State	Approved Teaching Fee	$6,000
	State of Maryland	Legislative Pension	$9,000
	Civil War Roundtable (Oct 2nd)	Spouse Speech	$1,000
	Ontario County Board of Education	Spouse Salary	NA
	General Services Administration	Spouse Salary	NA

For payments to charity in lieu of honoraria, use Schedule II.

1204

Name Michael P. Forbes | Page 2 of 3

SCHEDULE III — ASSETS AND "UNEARNED" INCOME

BLOCK A — Asset and/or Income Source

Identify (a) each asset held for investment or production of income with a fair market value exceeding $1,000 at the end of the reporting year, and (b) any other asset or source of income which generated more than $200 in "unearned" income during the year. For rental property or land, provide an address. Provide full names of any mutual funds. For an IRA or retirement plan that is *self directed*, list the underlying assets worth more than $1,000. For an IRA or retirement plan that is not selfdirected, name the institution holding the account.

Exclude: Your personal residence(s) (unless there is rental income), any debt owed to you by your spouse, or by your or your spouse's child, parent, or sibling, any deposits totalling $5,000 or less in personal savings accounts, any financial interests in or income derived from U.S. Government retirement programs.

If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC) or is jointly held (JT), in the optional column on the far left.

BLOCK B — Value of Asset

at close of reporting year. If you use a valuation method other than fair market value, please specify the method used. If an asset was sold and is included only because it generated income, the value should be "None."

BLOCK C — Type of Income

BLOCK D — Amount of Income

For IRA's and retirement plans that are *not* self-directed, you may write in "NA" for income.

BLOCK E — Transaction

Indicate if asset was purchased (P), sold (S), or exchanged (E) in reporting year

BLOCK A	B: A None	B: B $1 – $1,000	B: C $1,001 – $15,000	B: C $15,001 – $50,000	B: E $50,001 – $100,000	B: F $100,001 – $250,000	B: G $250,001 – $500,000	B: H $500,001 – $1,000,000	B: I $1,000,001 – $5,000,000	B: J $5,000,001 – $25,000,000	B: K $25,000,001 – $50,000,000	B: L Over $50,000,000	C: DIVIDENDS	C: RENT	C: INTEREST	C: CAPITAL GAINS	C: EXCEPTED TRUST	C: QUALIFIED BLIND TRUST	C: Other Type of Income (Specify For Example: Partnership Income or Farm Income)	D: I None	D: II $1 – $200	D: III $201 – $1,000	D: IV $1,001 – $2,500	D: V $2,501 – $5,000	D: VI $5,001 – $15,000	D: VII $15,001 – $50,000	D: VIII $50,001 – $100,000	D: IX $100,001 – $1,000,000	D: X $1,000,001 – $5,000,000	D: XI Over $5,000,000	E: P, S, E
SP. SP Mega Corp. Stock					X								X																	P
DC. *Examples* Simon & Schuster			Indefinite												X				Royalties											
JT 1st Bank of Paducah KY accounts						X																			X					
*JT Condominium, Arlington, VA						X							X												X					

* Owned jointly with spouse and other persons

For additional assets and unearned income, use next page.

1205

SCHEDULE VIII — POSITIONS

Report all positions, compensated or uncompensated, held during the current calendar year as an officer, director, trustee of an organization, partner, proprietor, representative, employee, or consultant of any corporation, firm, partnership, or other business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States.

Exclude: Positions held in any religious, social, fraternal, or political entities, positions solely of an honorary nature, and positions listed on Schedule I.

Position	Name of Organization
Partner	Forbes & Gallagher

SCHEDULE IX — AGREEMENTS

Identify the date, parties to, and general terms of any agreement or arrangement with respect to: future employment; a leave of absence during the period of government service; continuation or deferral of payments by a former or current employer other than the U.S. Government; or continuing participation in an employee welfare or benefit plan maintained by a former employer.

Date	Parties To	Terms of Agreement

GPO 1998 46-260 (mac)

Use additional sheets if more space is required.

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1997

Form A
For use by Members, officers, and employees

98 MAY 14 PM 12:11

(Office Use Only)

Michael P. Forbes
(Full Name)

c/o George Sullivan, CPA - PO Box 500
(Mailing Address)

Southold NY 11971

Daytime Telephone 516-765-1118

Filer Status	[X] Member of the U S House of Representatives	State NY District 01	[ ] Officer or Employee	Employing Office	
Report Type	[ ] Annual (May 15)	[X] Amendment	[ ] Termination	Termination Date	

A $200 penalty shall be assessed against anyone who files more than 30 days late.

PRELIMINARY INFORMATION -- ANSWER EACH OF THESE QUESTIONS

I. Did you or your spouse have "earned" income (e.g., salaries or fees) of $200 or more from any source in the reporting period? **If yes, complete and attach Schedule I.** Yes [X] No [ ]

II. Did any individual or organization make a donation to charity in lieu of paying you for a speech, apppearance, or article in the reporting period? **If yes, complete and attach Schedule II.** Yes [ ] No [X]

III. Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? **If yes, complete and attach Schedule III.** Yes [X] No [ ]

IV. Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset worth more than $1,000 in the reporting period? **If yes, complete and attach Schedule IV.** Yes [ ] No [X]

V. Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? **If yes, complete and attach Schedule V.** Yes [ ] No [X]

VI. Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $250 and not otherwise exempt)? **If yes, complete and attach Schedule VI.** Yes [ ] No [X]

VII. Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $250 from one source)? **If yes, complete and attach Schedule VII.** Yes [X] No [ ]

VIII. Did you hold any reportable positions on or before the date of filing in the current calendar year? **If yes, complete and attach Schedule VIII.** Yes [X] No [ ]

IX. Did you have any reportable agreement or arrangement with an outside entity? **If yes, complete and attach Schedule IX.** Yes [ ] No [X]

Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION -- ANSWER EACH OF THESE QUESTIONS

TRUSTS- Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child? (See Instructions, pages 10-11.) Yes [ ] No [X]

EXEMPTION Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption? (See Instructions, page 11.) Yes [ ] No [X]

CERTIFICATION -- THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended. The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct or its designee. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil penalties and criminal sanctions (See 5 U.S.C. app. 4, 104 and 18 U.S.C. 1001)

SIGNATURE OF REPORTING INDIVIDUAL Mike Forbes

DATE (Month/Day/Year) 5/14/98

1207

Name Michael P. Forbes	Page ___ of _

SCHEDULE I -- EARNED INCOME

List the source, type, and amount of earned income from any source (other than the filer's current employment by the U.S. Government) totalling $200 or more during the preceding calendar year. For a spouse, list the source and amount of any honoraria, list only the source for other spouse earned income exceeding $1,000. For further information, see Instructions, pages 12-13

	Source	Type	Amount
	Keene State	Approved Teaching Fee	$10,000
	State of Maryland	Legislative Pension	$9,000
Examples:	Civil War Roundtable (Oct 2nd)	Spouse Speech	$1,000
	Ontario County Board of Education	Spouse Salary	NA
	General Services Administratio	Spouse Salary	NA

For payments to charity in lieu of honoraria, use Schedule II.

1208

Name Michael P Forbes | Page _ of __

SCHEDULE III -- ASSETS AND "UNEARNED" INCOME

BLOCK A **Asset and/or Income Source** Identify (a) each asset held for investment or production of income with a fair market value exceeding $1,000 at the end of the reporting year, and (b) any other asset or source of income which generated more than $200 in "unearned" income during the year. For rental property or land, provide an address. Provide full names of any mutual funds. For an IRA or retirement plan that is *self-directed*, list the underlying assets worth more than $1,000. For an IRA or retirement plan that is *not* self-directed, name the institution holding the account **Exclude:** Your personal residence(s) (unless there is rental income); any debt owed to you by your spouse, or by your or your spouse's child, parent, or sibling; any deposits totalling $5,000 or less in personal savings accounts, any financial interests in or income derived from U S Government retirement programs If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC) or is jointly held (JT), in the optional column on the far left For further information, see Instructions, pages 14-20	BLOCK B **Value of Asset** at close of reporting year If you use a valuation method other than fair market value, please specify the method used If an asset was sold and is included only because it generated income, the value should be "None"	BLOCK C **Type of Income** If other than one of the listed categories, specify the type of income by writing a brief description in this block	BLOCK D **Amount of Income** For IRA's and retirement plans that are *not* self-directed, you may write in "NA" for income.	BLOCK E **Transaction** Indicate if asset was purchased(P), sold(S), or exchanged(E) in reporting year
SP DC *Examples* SP Mega Corp Stock JT 123 Main St , Dover, Del 1st Bank of Paducah, KY accounts	$15,001 - $50,000 $250,001 - $500,000 $50,001 - $100,000	Dividends Rent Interest	$201 - $1,000 $1,001 - $2,500 $5,001 - $15,000	P
JT Condominium - Arlington, VA	$100,001 - $250,000	Rent	$5,001 - $15,000	NA

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Name Michael P Forbes	Page ____ of ____

SCHEDULE VII -- TRAVEL PAYMENTS AND REIMBURSEMENTS

Identify the source and list travel itinerary, dates, and nature of expenses provided for travel and travel-related expenses totalling more than $250 received by you, your spouse, or a dependent child during the reporting period. Indicate whether a family member accompanied the traveler at the sponsor's expense, and the amount of time, if any, that was not at the sponsor's expense. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor.
Exclude: Travel-related expenses provided by federal, state and local governments, or by a foreign government required to be separately reported under the Foreign Gifts and Decorations Act (5 U.S.C. 7342), travel paid for by a Federal political committee, travel provided to a spouse or dependent child that is totally independent of his or her relationship to you. For further information, see instructions, pages 24-26.

	Source	Date(s)	Point of Departure--Destination--Point of Return	Lodging? (Y/N)	Food? (Y/N)	Was a Family Member Included? (Y/N)	Any time not at sponsor's expense
Examples	Chicago Chamber of Commerce	Mar 2	Wash., D.C.-Chicago-Wash., D.C.	N	N	N	N
	Mega Corporation	Aug 6-13	Wash., D.C.-Los Angeles-Cleveland	Y	Y	Y	4 Days
Aspen Insutute		3-7-97 to 3-9-97	Washington, DC - Hersey, PA - Washington, DC	Y	Y	Y	None

Name Michael P Forbes	Page ____ of ____

SCHEDULE VIII -- POSITIONS

Report all positions, compensated or uncompensated, held during the current calendar year as an officer, director, trustee of an organization, partner, proprietor, representative, employee, or consultant of any corporation, firm, partnership, or other business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States. For further information, see Instructions, page 26.

Exclude: Positions held in any religious, social, fraternal, or political entities, positions solely of an honorary nature; and positions listed on Schedule I.

Position	Organization
Partner	Forbes & Gallagher

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1997

FORM A
For use by Members, officers, and employees

RECEIVED
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(4)
HAND DELIVERED
MC
(Office Use Only)

Harold E. Ford, Jr.
(Full Name)

58 Rivermist, Memphis, Tennessee 38103
(Mailing Address)

(202) 225-3265
Daytime Telephone

Filer Status: [X] Member of the U.S. House of Representatives — State Tennessee District 9th; [ ] Officer or Employee — Employing Office

Report Type: [X] Annual (May 15); [ ] Amendment; [ ] Termination — Termination Date

A *$200 penalty* shall be assessed against anyone who files more than 30 days late.

PRELIMINARY INFORMATION — ANSWER EACH OF THESE QUESTIONS

I. Did you or your spouse have "earned" income (e.g., salaries or fees) of $200 or more from any source in the reporting period? **If yes, complete and attach Schedule I.** — Yes [ ] No [X]

II. Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? **If yes, complete and attach Schedule II.** — Yes [X] No [ ]

III. Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? **If yes, complete and attach Schedule III.** — Yes [ ] No [X]

IV. Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset worth more than $1,000 in the reporting period? **If yes, complete and attach Schedule IV.** — Yes [ ] No [X]

V. Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? **If yes, complete and attach Schedule V.** — Yes [X] No [ ]

VI. Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $250 and not otherwise exempt)? **If yes, complete and attach Schedule VI.** — Yes [ ] No [X]

VII. Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $250 from one source)? **If yes, complete and attach Schedule VII.** — Yes [X] No [ ]

VIII. Did you hold any reportable positions on or before the date of filing in the current calendar year? **If yes, complete and attach Schedule VIII.** — Yes [ ] No [X]

IX. Did you have any reportable agreement or arrangement with an outside entity? **If yes, complete and attach Schedule IX.** — Yes [ ] No [X]

Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION — ANSWER EACH OF THESE QUESTIONS

TRUSTS—Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child? — Yes [ ] No [X]

EXEMPTION—Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption? — Yes [ ] No [X]

CERTIFICATION — THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended. The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct or its designee. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil penalties and criminal sanctions (*See* 5 U.S.C. app. 4, §104 and 18 U.S.C. §1001)

SIGNATURE OF REPORTING INDIVIDUAL: Harold Ford Jr.

DATE (Month/Day/Year): 5/13/98

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SCHEDULE II — PAYMENTS IN LIEU OF HONORARIA MADE TO CHARITY

List the source, activity (i.e., speech, appearance, or article), date, and amount of any payment made by the sponsor of an event to a charitable organization in lieu of an honorarium. A separate confidential list of charities receiving such payments must be filed directly with the Committee on Standards of Official Conduct. An envelope for transmitting the list is included in each Member's filing package.

Source	Activity	Date	Amount
Examples Association of American Associations, Wash . D C XYZ Magazine	Speech Article	Feb 2, 1997 Aug 13, 1997	$2,000 $500
National Council of Educational Opportunity Associations	speech	9/7/97	$2,000.00
Christian Methodist Episcopal Church	speech	10/27/97	$1,000.00
The Washington Caucus	speech	10/2/97	$500.00
Norhteast Mississippi Annual Conference 4th Episcopal District CME Church	speech	11/1/97	$1,000.00
Whitehaven District Association	speech	12/31/97	$500.00

This page may be copied if more space is required.

SCHEDULE V — LIABILITIES

Report liabilities of over $10,000 owed to any one creditor ***at any time*** during the reporting period by you, your spouse, or dependent child. Mark the highest amount owed during the year. **Exclude:** Any mortgage on your personal residence (unless it is rented out), loans secured by automobiles, household furniture, or appliances, and liabilities owed to a spouse, or the child, parent, or sibling of you or your spouse. Report ***revolving charge accounts*** only if the balance at the end of the reporting period exceeded $10,000

SP. DC. JT	Creditor	Type of Liability	Amount of Liability B $10,001 – $15,000	C $15,001 – $50,000	D $50,001 – $100,000	E $100,001 – $250,000	F $250,001 – $500,000	G $500,001 – $1,000,000	H $1,000,001 – $5,000,000	I $5,000,001 – $25,000,000	J $25,000,001 – $50,000,000	K Over $50,000,000
Example	First Bank of Wilmington, Delaware	Mortgage on 123 Main St., Dover, Del.				x						
	William D. Ford Federal Direct Loan Program, U.S. Dept of Education	Educational Loan		x								
	First Tennessee Bank, N.A., Memphis, Tennessee	Consumer Loan		x								

SCHEDULE VI — GIFTS

Report the source, a brief description, and the value of all gifts totalling more than $250 received by you, your spouse, or a dependent child from any source during the year.

Exclude: Gifts from relatives, gifts of personal hospitality of an individual, local meals, and gifts to a spouse or dependent child that are totally independent of his or her relationship to you. Gifts with a value of $100 or less need not be added towards the $250 disclosure threshold.

Note: The gift rule (House Rule 51) prohibits gifts except as specifically provided in the rule.

Source	Description	Value
Example Mr. Joseph H. Smith, Anytown, Anystate	Silver Platter (determination on personal friendship received from Committee on Standards)	$270

Use additional sheets if more space is required.

Name	Harold E. Ford, Jr.	Page 4 of 4

SCHEDULE VII —TRAVEL PAYMENTS AND REIMBURSEMENTS

Identify the source and list travel itinerary, dates, and nature of expenses provided for travel and travel-related expenses totalling more than $250 received by you, your spouse, or a dependent child during the reporting period. Indicate whether a family member accompanied the traveler at the sponsor's expense, and the amount of time, if any, that was not at the sponsor's expense. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor

Exclude: Travel-related expenses provided by federal, state, and local governments, or by a foreign government required to be separately reported under the Foreign Gifts and Decorations Act (5 U.S.C. § 7342); travel paid for by a Federal political committee; travel provided to a spouse or dependent child that is totally independent of his or her relationship to you.

Source	Date(s)	Point of Departure—Destination—Point of Return	Lodging? (Y/N)	Food? (Y/N)	Was a Family Member Included? (Y/N)	Any time not at sponsor's expense
Examples Chicago Chamber of Commerce	Mar 2	Wash., D.C.—Chicago—Wash., D.C.	N	N	N	N
Roycroft Corporation	Aug. 6–13	Wash., D.C.—Los Angeles—Cleveland	Y	Y	Y	4 Days
National Association for Equal Opportunity in Higher Education	July 6-7	Memphis-Savannah, GA-Washington DC	Y	Y	N	N
Young Democrats of America	Aug.15-21	Memphis - Miami - Memphis	Y	Y	N	4 days
National Council of Educational Opportunity Assoc.	Sept. 7	Memphis - New Orleans-Memphis	N	N	N	N
Christian Methodist Episcopal Church	Oct. 7	Washington DC-Cincinnatti-Memphis	N	N	N	N
Florida Democratic Party	Oct. 3-5	Memphis - Tampa-Memphis	Y	Y	N	N
Politically Incorrect 1997	Oct 24-27	Washington DC - Los Angeles - Washington DC	Y	Y	N	2 days
McGreevey for Governor	Nov. 2	Memphis - New York-Memphis	N	N	N	N
Tennessee Association Mental Health Organization	Nov. 3-4	Memphis -Nashville - Washington DC	Y	Y	N	N

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UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1997

FORM A

For use by Members, officers, and employees

98 MAY 15 AM 11:36

Vito John Fossella
(Full Name)

15 Grandview Avenue
(Mailing Address)

Staten Island, NY 10308

(718) 987-8400
Daytime Telephone

(Office Use Only)

Filer Status	[X] Member of the U.S. House of Representatives	State: New York	District: 13th	[ ] Officer or Employee	Employing Office
Report Type	[X] Annual (May 15)	[ ] Amendment		[ ] Termination	Termination Date

A *$200 penalty* shall be assessed against anyone who files more than 30 days late.

PRELIMINARY INFORMATION — ANSWER EACH OF THESE QUESTIONS

I. Did you or your spouse have "earned" income (e.g., salaries or fees) of $200 or more from any source in the reporting period? **If yes, complete and attach Schedule I.** — Yes [X] No [ ]

II. Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? **If yes, complete and attach Schedule II.** — Yes [ ] No [X]

III. Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? **If yes, complete and attach Schedule III.** — Yes [X] No [ ]

IV. Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset worth more than $1,000 in the reporting period? **If yes, complete and attach Schedule IV.** — Yes [ ] No [X]

V. Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? **If yes, complete and attach Schedule V.** — Yes [X] No [ ]

VI. Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $250 and not otherwise exempt)? **If yes, complete and attach Schedule VI.** — Yes [ ] No [X]

VII. Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $250 from one source)? **If yes, complete and attach Schedule VII** — Yes [ ] No [X]

VIII. Did you hold any reportable positions on or before the date of filing in the current calendar year? **If yes, complete and attach Schedule VIII.** — Yes [X] No [ ]

IX. Did you have any reportable agreement or arrangement with an outside entity? **If yes, complete and attach Schedule IX.** — Yes [ ] No [X]

Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION — ANSWER EACH OF THESE QUESTIONS

TRUSTS—Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child? — Yes [ ] No [X]

EXEMPTION—Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption? — Yes [ ] No [X]

CERTIFICATION — THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended. The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct or its designee. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil penalties and criminal sanctions (*See* 5 U.S.C. app. 4, §104 and 18 U.S.C. §1001)

SIGNATURE OF REPORTING INDIVIDUAL

DATE (Month/Day/Year) May 14, 1998

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Name Vito J. Fossella	Page 1 of 5

SCHEDULE I — EARNED INCOME

List the source, type, and amount of earned income from any source (other than the filer's current employment by the U.S. Government) totalling $200 or more during the preceding calendar year. For a spouse, list the source and amount of any honoraria; list only the source for other spouse earned income exceeding $1,000.

Source	Type	Amount
Examples: Keene State	Approved Teaching Fee	$6,000
State of Maryland	Legislative Pension	$9,000
Civil War Roundtable (Oct. 2nd)	Spouse Speech	$1,000
Ontario County Board of Education	Spouse Salary	NA
New York City Council	Salary	54,688.44
Helbock & Nappa	Legal Fees	11,059.00
Chase Manhattan Bank	Spouse Salary	N/A
(Member of House of Representatives Since 11/5/97)		

For payments to charity in lieu of honoraria, use Schedule II.

SCHEDULE III — ASSETS AND "UNEARNED" INCOME

Name Vito J. Fossella | Page 2 of 5

BLOCK A — Asset and/or Income Source

Identify (a) each asset held for investment or production of income with a fair market value exceeding $1,000 at the end of the reporting year, and (b) any other asset or source of income which generated more than $200 in "unearned" income during the year. For rental property or land, provide an address. Provide full names of any mutual funds. For an IRA or retirement plan that is *self-directed*, list the underlying assets worth more than $1,000. For an IRA or retirement plan that is not self-directed, name the institution holding the account.

Exclude: Your personal residence(s) (unless there is rental income), any debt owed to you by your spouse, or by you or your spouse's child, parent, or sibling; any deposits totalling $5,000 or less in personal savings accounts; any financial interests in or income derived from U.S. Government retirement programs.

If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC) or is jointly held (JT), in the optional column on the far left.

SP	*Examples*	SP	Mega Corp. Stock
DC			Simon & Schuster
JT			1st Bank of Paducah, KY accounts

BLOCK B — Value of Asset

at close of reporting year. If you use a valuation method other than fair market value, please specify the method used. If an asset was sold and is included only because it generated income, the value should be "None."

A	B	C	E	F	G	H	I	J	K	L		
None	$1 – $1,000	$1,001 – $15,000	$15,001 – $50,000	$50,001 – $100,000	$100,001 – $250,000	$250,001 – $500,000	$500,001 – $1,000,000	$1,000,001 – $5,000,000	$5,000,001 – $25,000,000	$25,000,001 – $50,000,000	Over $50,000,000	
		Indefinite	X		X							

BLOCK C — Type of Income

DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Type of Income (Specify. For Example: Partnership Income or Farm Income)
X						
		X				Royalties

BLOCK D — Amount of Income

For IRA's and retirement plans that are *not* self-directed, you may write in "NA" for income.

I	II	III	IV	V	VI	VII	VIII	IX	X	XI
None	$1 – $200	$201 – $1,000	$1,001 – $2,500	$2,501 – $5,000	$5,001 – $15,000	$15,001 – $50,000	$50,001 – $100,000	$100,001 – $1,000,000	$1,000,001 – $5,000,000	Over $5,000,000
		X			X			X		

BLOCK E — Transaction

Indicate if asset was purchased (P), sold (S), or exchanged (E) in reporting year

	A		B		C		E		F		G		H		I		J		K		L		
	None		$1 – $1,000		$1,001 – $15,000		$15,001 – $50,000		$50,001 – $100,000		$100,001 – $250,000		$250,001 – $500,000		$500,001 – $1,000,000		$1,000,001 – $5,000,000		$5,000,001 – $25,000,000		$25,000,001 – $50,000,000		Over $50,000,000
JT Chase Manhattan Bank Accounts					X																		
SP Chase Manhattan Stock Options							X																
SP Chase Manhattan Thrift Savings							X																
NYC Deferred Compensation					X																		
SP Chase Manhattan Retirement							X																
SP Chase Manhattan Stock Options							Y																

	I		II		III		IV		V		VI		VII		VIII		IX		X		XI		
	None		$1 – $200		$201 – $1,000		$1,001 – $2,500		$2,501 – $5,000		$5,001 – $15,000		$15,001 – $50,000		$50,001 – $100,000		$100,001 – $1,000,000		$1,000,001 – $5,000,000		Over $5,000,000		
JT Chase Manhattan Bank Accounts					X																		
SP Chase Manhattan Stock Options																							
SP Chase Manhattan Thrift Savings																							
NYC Deferred Compensation	X																						
SP Chase Manhattan Retirement							X																
SP Chase Manhattan Stock Options																							

(NOT Exercised)
(LOSS)
(Not Exercised)

For additional assets and unearned income, use next page.

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SCHEDULE III — ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Name Vito J. Fossella | Page 3 of 5

SP. DC JT	BLOCK A Asset and/or Income Source	BLOCK B Year-End Value of Asset											BLOCK C Type of Income						BLOCK D Amount of Income										BLOCK E Transaction
		A None	B $1 – $1,000	C $1,001 – $15,000	D $15,001 – $50,000	E $50,001 – $100,000	F $100,001 – $250,000	G $250,001 – $500,000	H $500,001 – $1,000,000	I $1,000,001 – $5,000,000	J $5,000,001 – $25,000,000	K $25,000,001 – $50,000,000	L Over $50,000,000	DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Type of Income (Specify)	I None	II $1 – $200	III $201 – $1,000	IV $1,001 – $2,500	V $2,501 – $5,000	VI $5,001 – $15,000	VII $15,001 – $50,000	VIII $50,001 – $100,000	IX $100,001 – $1,000,000	X $1,000,001 – $5,000,000	XI Over $5,000,000	P, S, E
DC	Chase Manhattan Savings Account			X												X						X									

Name Vito J. Fossella | Page 4 of 5

SCHEDULE V — LIABILITIES

Report liabilities of over $10,000 owed to any one creditor ***at any time*** during the reporting period by you, your spouse, or dependent child. Mark the highest amount owed during the year. **Exclude**: Any mortgage on your personal residence (unless it is rented out), loans secured by automobiles, household furniture, or appliances, and liabilities owed to a spouse, or the child, parent, or sibling of you or your spouse. Report ***revolving charge accounts*** only if the balance at the end of the reporting period exceeded $10,000.

SP DC JT	Creditor	Type of Liability	Amount of Liability									
			B $10,001 – $15,000	C $15,001 – $50,000	D $50,001 – $100,000	E $100,001 – $250,000	F $250,001 – $500,000	G $500,001 – $1,000,000	H $1,000,001 – $5,000,000	I $5,000,001 – $25,000,000	J $25,000,001 – $50,000,000	K Over $50,000,000
	Example: First Bank of Wilmington, Delaware	Mortgage on 123 Main St., Dover, Del				x						
	Staten Island Savings Bank (Sallie Mae)	Student Loan	X									

SCHEDULE VI — GIFTS

Report the source, a brief description, and the value of all gifts totalling more than $250 received by you, your spouse, or a dependent child from any source during the year.

Exclude: Gifts from relatives, gifts of personal hospitality of an individual, local meals, and gifts to a spouse or dependent child that are totally independent of his or her relationship to you. Gifts with a value of $100 or less need not be added towards the $250 disclosure threshold.

Note: The gift rule (House Rule 51) prohibits gifts except as specifically provided in the rule.

Source	Description	Value
Example: Mr. Joseph H. Smith, Anytown, Anystate	Silver Platter (determination on personal friendship received from Committee on Standards)	$270
N/A		

Use additional sheets if more space is required.

SCHEDULE VIII — POSITIONS

Report all positions, compensated or uncompensated, held during the current calendar year as an officer, director, trustee of an organization, partner, proprietor, representative, employee, or consultant of any corporation, firm, partnership, or other business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States.

Exclude: Positions held in any religious, social, fraternal, or political entities; positions solely of an honorary nature; and positions listed on Schedule I.

Position	Name of Organization
City Council Member	New York City Council (Terminated)
of Counsel	Helbock & Nappa (Terminated)

SCHEDULE IX — AGREEMENTS

Identify the date, parties to, and general terms of any agreement or arrangement with respect to: future employment; a leave of absence during the period of government service; continuation or deferral of payments by a former or current employer other than the U.S. Government; or continuing participation in an employee welfare or benefit plan maintained by a former employer.

Date	Parties To	Terms of Agreement
	N/A	

GPO 1998 46-260 (mac)

Use additional sheets if more space is required.

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1997

FORM A

For use by Members, officers, and employees

Tillie K. Fowler
(Full Name)

4730 Prince Edward Road; Jacksonville, FL 32210 (Mailing Address) 202 225-2501 (Daytime Telephone)

Contact: Buck Fowler 904 388-7342

(Office Use Only)

Filer Status: [X] Member of the U.S. House of Representatives — State Florida District Fourth; [ ] Officer or Employee — Employing Office

Report Type: [X] Annual (May 15); [ ] Amendment; [ ] Termination — Termination Date

A *$200 penalty* shall be assessed against anyone who files more than 30 days late.

PRELIMINARY INFORMATION — ANSWER EACH OF THESE QUESTIONS

I. Did you or your spouse have "earned" income (e.g., salaries or fees) of $200 or more from any source in the reporting period?
If yes, complete and attach Schedule I — Yes [X] No [ ]

II. Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period?
If yes, complete and attach Schedule II. — Yes [ ] No [X]

III. Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period?
If yes, complete and attach Schedule III. — Yes [X] No [ ]

IV. Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset worth more than $1,000 in the reporting period?
If yes, complete and attach Schedule IV. — Yes [ ] No [X]

V. Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period?
If yes, complete and attach Schedule V. — Yes [ ] No [X]

VI. Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $250 and not otherwise exempt)?
If yes, complete and attach Schedule VI. — Yes [ ] No [X]

VII. Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $250 from one source)?
If yes, complete and attach Schedule VII — Yes [X] No [ ]

VIII. Did you hold any reportable positions on or before the date of filing in the current calendar year?
If yes, complete and attach Schedule VIII — Yes [X] No [ ]

IX. Did you have any reportable agreement or arrangement with an outside entity?
If yes, complete and attach Schedule IX — Yes [ ] No [X]

Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION — ANSWER EACH OF THESE QUESTIONS

TRUSTS— Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child? — Yes [ ] No [X]

EXEMPTION— Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption? — Yes [ ] No [X]

CERTIFICATION — THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended. The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct or its designee. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil penalties and criminal sanctions (*See* 5 U.S.C. app. 4 §104 and 18 U.S.C. §1001).

SIGNATURE OF REPORTING INDIVIDUAL: Tillie K. Fowler

DATE (Month/Day/Year): May 7, 1998

SCHEDULE I — EARNED INCOME

List the source, type, and amount of earned income from any source (other than the filer's current employment by the U.S Government) totalling $200 or more during the preceding calendar year. For a spouse, list the source and amount of any honoraria; list only the source for other spouse earned income exceeding $1,000.

Source	Type	Amount
Examples: Keene State	Approved Teaching Fee	$6,000
State of Maryland	Legislative Pension	$9,000
Civil War Roundtable (Oct 2nd)	Spouse Speech	$1,000
Ontario County Board of Education	Spouse Salary	NA
R. W. Fowler and Associates, Inc. and Related Companies Atlantic Beach, Florida	Spouse Salary	NA
Seasafe, Inc.; Lafayette, LA.	Spouse Consulting Fee	NA

For payments to charity in lieu of honoraria, use Schedule II.

Name Tillie K. Fowler | Page 3 of 10

SCHEDULE III — ASSETS AND "UNEARNED" INCOME

BLOCK A — Asset and/or Income Source

Identify (a) each asset held for investment or production of income with a fair market value exceeding $1,000 at the end of the reporting year, and (b) any other asset or source of income which generated more than $200 in "unearned" income during the year. For rental property or land, provide an address. Provide full names of any mutual funds. For an IRA or retirement plan that is *self directed*, list the underlying assets worth more than $1,000. For an IRA or retirement plan that is not selfdirected, name the institution holding the account.

Exclude: Your personal residence(s) (unless there is rental income); any debt owed to you by your spouse, or by your or your spouse's child, parent, or sibling; any deposits totalling $5,000 or less in personal savings accounts; any financial interests in or income derived from U.S. Government retirement programs.

If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC) or is jointly held (JT), in the optional column on the far left.

BLOCK B — Value of Asset

at close of reporting year. If you use a valuation method other than fair market value, please specify the method used. If an asset was sold and is included only because it generated income, the value should be "None."

BLOCK C — Type of Income

BLOCK D — Amount of Income

For IRA's and retirement plans that are *not* self-directed, you may write in "NA" for income.

BLOCK E — Transaction

Indicate if asset was purchased (P), sold (S), or exchanged (E) in reporting year.

			A None	B $1 – $1,000	C $1,001 – $15,000	$15,001 – $50,000	E $50,001 – $100,000	F $100,001 – $250,000	G $250,001 – $500,000	H $500,001 – $1,000,000	I $1,000,001 – $5,000,000	J $5,000,001 – $25,000,000	K $25,001,001 – $50,000,000	L Over $50,000,000	DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Type of Income (Specify. For Example Partnership Income or Farm Income)	I None	II $1 – $200	III $201 – $1,000	IV $1,001 – $2,500	V $2,501 – $5,000	VI $5,001 – $15,000	VII $15,001 – $50,000	VIII $50,001 – $100,000	IX $100,001 – $1,000,000	X $1,000,001 – $5,000,000	XI Over $5,000,000	
SP		SP	Mega Corp. Stock				X								X																	P
DC	*Examples*		Simon & Schuster		Indefinite																	Royalties											
JT			1st Bank of Paducah KY accounts					X								X										X							
SP	R. W. Fowler and Associates, Inc. and Related Companies Stock										X				X														X			P

For additional assets and unearned income, use next page.

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SCHEDULE III — ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Name Tillie K. Fowler

	SP DC JT	BLOCK A Asset and/or Income Source	BLOCK B Year-End Value of Asset											BLOCK C Type of Income							BLOCK D Amount of Income										BLOCK E Transaction
			A None	B $1 – $1,000	C $1,001 – $15,000	D $15,001 – $50,000	E $50,001 – $100,000	F $100,001 – $250,000	G $250,001 – $500,000	H $500,001 – $1,000,000	I $1,000,001 – $5,000,000	J $5,000,001 – $25,000,000	K $25,000,001 – $50,000,000	L Over $50,000,000	DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Type of Income (Specify)	I None	II $1 – $200	III $201 – $1,000	IV $1,001 – $2,500	V $2,501 – $5,000	VI $5,001 – $15,000	VII $15,001 – $50,000	VIII $50,001 – $100,000	IX $100,001 – $1,000,000	X $1,000,001 – $5,000,000	XI Over $5,000,000	
2.	SP	Note receivable from sale of unimproved property located at 4500 Ortega Forest Drive; Jacksonville, FL. (note paid off by debtors January 1997)	X													X							X								Note collected Jan 1997
3.	DC	Sun Trust Commom Stock			X									X								X									
4.	SP	Paine Webber, Inc. Retirement Account Jacksonville,FL Listing of assets on Attached Schedule Pages A-1 to A-40								X														NA							
5.	SP	Lo Jack Corporation Common Stock				X																X									

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SCHEDULE III — ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Name Tillie K. Fowler | Page 5 of 10

		BLOCK A Asset and/or Income Source	BLOCK B Year-End Value of Asset											BLOCK C Type of Income							BLOCK D Amount of Income										BLOCK E Transaction
	SP DC JT		A None	B $1 - $1,000	C $1,001 - $15,000	D $15,001 - $50,000	E $50,001 - $100,000	F $100,001 - $250,000	G $250,001 - $500,000	H $500,001 - $1,000,000	I $1,000,001 - $5,000,000	J $5,000,001 - $25,000,000	K $25,000,001 - $50,000,000	L Over $50,000,000	DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Type of Income (Specify)	I None	II $1 - $200	III $201 - $1,000	IV $1,001 - $2,500	V $2,501 - $5,000	VI $5,001 - $15,000	VII $15,001 - $50,000	VIII $50,001 - $100,000	IX $100,001 - $1,000,000	X $1,000,001 - $5,000,000	XI Over $5,000,000	
6.	SP	Sun Trust Bank Accounts								X							X										X					
7.	SP	635A Ponte Vedra Blvd Ponte Vedra Beach, FL								X						X											X					
8.	SP	Douglas Partnership I,Ltd. Office Building Tallahassee, FL.				X										X								X								
9.		South Trust Bank Bank Accounts Jacksonville,FL				X											X							X								
10.		First National Bank of Baldwin County Milledgeville, GA. Bank Account	X														X					X										Account Closed during 1997
11.		South Trust Bank IRA Account Jacksonville,FL			X																										NA	

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SCHEDULE III — ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Name Tillie K. Fowler | Page 6 of 10

	SP/DC/JT	BLOCK A Asset and/or Income Source	BLOCK B Year-End Value of Asset											BLOCK C Type of Income							BLOCK D Amount of Income										BLOCK E Transaction
			A None	B $1 – $1,000	C $1,001 – $15,000	D $15,001 – $50,000	E $50,001 – $100,000	F $100,001 – $250,000	G $250,001 – $500,000	H $500,001 – $1,000,000	I $1,000,001 – $5,000,000	J $5,000,001 – $25,000,000	K $25,000,001 – $50,000,000	L Over $50,000,000	DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Type of Income (Specify)	I None	II $1 – $200	III $201 – $1,000	IV $1,001 – $2,500	V $2,501 – $5,000	VI $5,001 – $15,000	VII $15,001 – $50,000	VIII $50,001 – $100,000	IX $100,001 – $1,000,000	X $1,000,001 – $5,000,000	XI Over $5,000,000	
12.		First Union Bank of Florida, Bank Accounts Jacksonville, FL				X										X								X							
13.	SP	Paine Webber Investment Accounts, Jacksonville, FL (Pages B-1 to B-5 Attached)								X						X									X						
14.	SP	First Guaranty Bank Jacksonville, FL Bank Accounts					X									X						X									
15.		First Guraanty Bank Jacksonville, FL Bank Accounts			X											X						X									
16.	SP	Island One Communications; Common Stock			X																	X									

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SCHEDULE III — ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Name Tillie K. Fowler | Page 7 of 10

	SP DO JT	BLOCK A Asset and/or Income Source	BLOCK B Year-End Value of Asset										BLOCK C Type of Income							BLOCK D Amount of Income										BLOCK E Transaction
			A None	B $1 – $1,000	C $1,001 – $15,000	D $15,001 – $50,000	E $50,001 – $100,000	F $100,001 – $250,000	G $250,001 – $500,000	H $500,001 – $1,000,000	I $1,000,001 – $5,000,000	J $5,000,001 – $25,000,000	K $25,000,001 – $50,000,000	L Over $50,000,000	DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Type of Income (Specify)	I None	II $1 – $200	III $201 – $1,000	IV $1,001 – $2,500	V $2,501 – $5,000	VI $5,001 – $15,000	VII $15,001 – $50,000	VIII $50,001 – $100,000	IX $100,001 – $1,000,000	X Over $1,000,000	
17.	SP	Speakeasy Partnership						X														X								

Name	Page
Tillie K. Fowler	8 of 10

SCHEDULE VII —TRAVEL PAYMENTS AND REIMBURSEMENTS

Identify the source and list travel itinerary, dates, and nature of expenses provided for travel and travel-related expenses totalling more than $250 received by you, your spouse, or a dependent child during the reporting period. Indicate whether a family member accompanied the traveler at the sponsor's expense, and the amount of time, if any, that was not at the sponsor's expense. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor.

Exclude: Travel-related expenses provided by federal, state, and local governments, or by a foreign government required to be separately reported under the Foreign Gifts and Decorations Act (5 U.S.C. § 7342), travel paid for by a Federal political committee, travel provided to a spouse or dependent child that is totally independent of his or her relationship to you.

Source	Date(s)	Point of Departure—Destination—Point of Return	Lodging? (Y/N)	Food? (Y/N)	Was a Family Member Included? (Y/N)	Any time not at sponsor's expense
Examples: Chicago Chamber of Commerce	Mar 2	Wash., D.C.—Chicago—Wash., D.C.	N	N	N	N
Roycroft Corporation	Aug 6-13	Wash., D.C.—Los Angeles—Cleveland	Y	Y	Y	4 Days
Institute des Sciences des Techniques	Feb 16-22	Wash., D.C.-Paris, France-Jacksonville,FL	Y	Y	Y	3 days
John C. Stennis Center for Public Service	June 3	Jax., FL-Lexington, KY.-~~Jax., FL.~~ Wash, D.C.	N	N	N	N
Bipartisan Retreat,Aspen Institute	Mar 7-9	Wash., D.C.-Hershey, PA.-Wash., D.C.	Y	Y	N	N

This page may be copied if more space is required.

SCHEDULE VIII — POSITIONS

Report all positions, compensated or uncompensated, held during the current calendar year as an officer, director, trustee of an organization, partner, proprietor, representative, employee, or consultant of any corporation, firm, partnership, or other business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States.

Exclude: Positions held in any religious, social, fraternal, or political entities; positions solely of an honorary nature; and positions listed on Schedule I

Position	Name of Organization
	SEE ATTACHED LIST

SCHEDULE IX — AGREEMENTS

Identify the date, parties to, and general terms of any agreement or arrangement with respect to: future employment, a leave of absence during the period of government service, continuation or deferral of payments by a former or current employer other than the U.S. Government; or continuing participation in an employee welfare or benefit plan maintained by a former employer.

Date	Parties To	Terms of Agreement

GPO 1998 46-260 (mac)

Use additional sheets if more space is required.

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Part VIII-Positions

Uncompensated

Board Member	-	St. Vincent's Foundation, Jacksonville, Florida Honorary Member
Board Member	-	American Red Cross, N. E. Florida Chapter
Board Member	-	World Golf Village Foundation, Ponte Vedra Beach, Florida
Board Member	-	U. S. Naval Academy, Annapolis, Maryland

December 1997
Individual Retirement Rollover Account

PAINEWEBBER INC
ONE INDEPENDENT DRIVE
JACKSONVILLE, FL 32202-5081

[redacted]

Net account value on November 28 $ 119,246.93
Net account value on December 31 $ 121,220.30
Money funds in 12/31 value $ 17,790.30
Other items not in net account value on 12/31
Insurance product values (est.) $ 81,621.24
Net account value plus above $ 202,841.54 *
* Excludes unpriced assets See back for details

PaineWebber
Retirement Account

Account Number [redacted]
Social Security Number [redacted]

Your Investment Executive
[redacted]

L BUCK FOWLER IRA/RLVR
4730 PRINCE EDWARD ROAD
JACKSONVILLE FL 32210-8110

Activity summary

Account value on November 28		$ 119,246.93
Cash flow		
Earnings / capital return	+ 1,824.87	
Security transactions (Excludes Money fund transactions)		
Change in value of investments	+ 148.50	
Account value on December 31		$ 121,220.30

Earnings and capital return summary

Earnings/capital return categories are for the current calendar year. All prior year entries are summarized separately.
This information should not be used for tax purposes. See back for details.

	Current period	Year to date
PaineWebber Money fund dividends	$ 62.37	$ 634.68
Interest	1,762.50	7,275.00
Total earnings / capital return	$ 1,824.87	$ 7,909.68
Prior year(s) entries and adjustments	.00	16.83

Asset summary

See reverse side for information on assets excluded from this summary.

	% of portfolio	Value
Money funds	14.67	17,790.30
U.S. Government securities	85.33	103,430.00
Total invested assets	100.00	$ 121,220.30
Net account value		$ 121,220.30

Account instructions
PaineWebber is your IRA Rollover custodian

Bulletin Board
IF YOU DO NOT HOLD OUTSIDE ASSETS
1) RETAIN THIS STMT FOR 1997 YEAR-END VALUE.
2) THIS INFO IS BEING FURNISHED TO THE IRS.
3) NET ACCT VALUE + ANNUITIES = TOTAL VALUE
RETIREMENT MONEY FUND UNDER $25? SEE BACK
FOR ACCOUNT INFORMATION CALL 1-800-762-1000

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A-1

[redacted]

PaineWebber
Retirement Account

[redacted]

Investment objectives

Investment objectives describe the general goals you have for your investments within an account. We understand that the investment objective(s) for this account are the following, in order of priority:

1 Growth 2 Income 3 Investment grade 4 Speculation

If you have any questions concerning these investment objectives or wish to change the investment objectives for this account, call your Investment Executive or Branch Manager for your branch office.

Asset portfolio

When available, prices, income and current values may be approximate and thus gains/losses may not be accurately reflected. Details on back. An asterisk (*) indicates a change in the current balance since the date of your prior month or the display of new data input at your branch office. Gains/losses are not calculated for zero coupon investments.

Insurance products

Annuity contracts, life insurance and long-term health care products listed below are not held in your account at PaineWebber and therefore are not included in your total account value.

Annuities

Amount	Description	Contract/policy no.	Current value	Rate	Issue date
66,000	CG ANNUITY 5 YR AS OF 12/16/97	CGA006994	81,621.24	6.95	10/16/94
66,000	Total		$ 81,621.24		

Money funds

Description	Opening balance	Closing balance	Closing share price	Average yield	Dividend period	Dividend paid
PW RETIREMENT MONEY FUND	15,965.43	17,790.30	1.00	4.96%	11/30 - 12/17	.28
Total	$ 15,965.43	$ 17,790.30				

U.S. Government securities

Prices are obtained from independent quotation bureaus that use computerized valuation formulas to calculate current values. Actual sale prices may vary. Bold lines indicate [illegible]

Coupon governments

Total face value of holding	Description	Price	Current value	Est. annual income	Next call date	Face value purchased	Purchase price	Accrued interest
50,000	FED NAT MTG ASSN RATE 7.0500% MATURES 12/10/98	101.172	50,586.00	3,525		50,000	[illegible]	[illegible]
50,000	FED NATL MTG ASSN RATE 7.5000% MATURES 02/11/02	105.688	52,844.00	3,750		50,000	[illegible]	[illegible]

[redacted]

(continued on page 3)

[redacted]

Coupon governments - continued

Total face value of maturity	Description	Price	Current value	Est annual income	Trade date	Face value purchased	Purchase price	Cost basis	Unrealized Gain/loss
100,000	Total		$ 103,430.00	7,275					

Monthly activity

Cash flow

Date	Activity	Description	Amount
11/28		Balance forward	$ .00
12/10	INTEREST	FED NAT MTG ASSN 7.0500% DUE 12/10/98 DTD 12/10/91 FC 06/10/92 PAID ON 50000	1,762.50
12/19	DIVIDEND	PW RETIREMENT MONEY FUND	62.37
		Funds used for money fund transactions	$ -1,824.87
12/31		Closing balance	$ .00

Money fund transactions

The PW Retirement Money Fund is your primary sweep fund. If your Retirement Money Fund balance is below $25.00, see reverse side for details.

Date	Activity	Money fund	Amount
11/28		Opening PW Retirement Money Fund	$ 15,965.43
12/11	BOUGHT	PW RETIREMENT MONEY FUND	1,762.50
12/19	BOUGHT	PW RETIREMENT MONEY FUND	62.37
12/31		Closing PW Retirement Money Fund	$ 17,790.30
		Money funds purchased	$ 1,824.87

1234

A-3

[redacted]

December 1997

PAINEWEBBER ACCESS
Individual Retirement Rollover Account

PAINEWEBBER INC
ONE INDEPENDENT DRIVE
JACKSONVILLE FL 32202 5081

[redacted]

Net account value on November 28 $ 229,773 67
Net account value on December 31 $ 230,534 80
Money funds in 12/31 value $ 17,607 40

* Excludes unpriced assets. *See BACK for details

PaineWebber

Retirement Account

Account Number [redacted]
Social Security Number [redacted]

Your Investment Executive

[redacted]

L BUCK FOWLER
JURIKA ACCESS
4730 PRINCE EDWARD ROAD
JACKSONVILLE FL 32210 8118

Activity summary

Account value on November 28		$ 229,773 67
Cash flow		
Earnings / capital return	+ 400 79	
Proceeds from security transactions	+ 3,630 98	
Funds used for security transactions	-9,432 38	
Security transactions (Excludes Money fund transactions.)		
Securities purchased	+ 9,432 38	
Securities sold	-3,630 98	
Change in value of investments	+ 360 34	
Account value on December 31		$ 230,534 80

Earnings and capital return summary

Given IRS capital return categories are for the current calendar year. All prior year entries are summarized separately. This information should not be used for tax purposes. See BACK for details.

	Current period	Year to date
PaineWebber Money fund dividends	$ 90 72	$ 1,049 56
Other dividends	310 07	2,355 29
Total earnings / capital return	$ 400 79	$ 3,400 85
Prior year(s) entries and adjustments	00	34 41

Investment objectives

Investment objectives describe the general goals you have for your investments within an account. We want to know if the selected objective(s) for this account are the following, in order of priority:

1 Growth 2 Income 3 Investment grade 4 Speculation

If you have any questions concerning these investment objectives or wish to change the investment objectives for this account, call your Investment Executive or Branch Manager for your branch office.

Account instructions:
Your PaineWebber ACCESS account is managed by
JURIKA & VOYLES ALL CAP
PaineWebber is your IRA Rollover Custodian

Bulletin Board
IF YOU DO NOT HOLD OUTSIDE ASSETS
1) RETAIN THIS STMT FOR 1997 YEAR END VALUE
2) THIS INFO IS BEING FURNISHED TO THE IRS.
3) NET ACCT VALUE + ANNUITIES = TOTAL VALUE

Asset summary

See BACK side for other asset categories not listed here.

	Percent of portfolio		Value
Equities	92 36		212,927 40
Money funds	7 64		17,607 40
Total invested assets	100 00	$	230,534 80
Net account value		$	230,534 80

[redacted]

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PaineWebber
Retirement Account

[redacted]

Asset portfolio

When available, prices, income and current values may be approximate and thus gains/losses may not be accurately reflected. Details on back. An asterisk (*) indicates a change in the original transaction data from the prior month or the display of new data input at your branch office. Gains/losses are not calculated for zero coupon investments.

Equities

Common stock

Total shares	Description	Price	Current value	Est annual income	Trade date	Shares purchased	Purchase price	Cost basis	Unrealized Gain/loss
90	ABT BUILDING PRODUCTS CORP	18 000	1,620 00		03/12/97	90 000	21 718	1,954	-334
100	ADOBE SYSTEMS INC (DELAWARE)	41 250	4,125 00	20	03/19/96	30 000	34 125	1,023	214
					06/26/96	40 000	34 821	1 392	258
					12/09/97	30 000	41 952	1,258	-20
220	AES CORP	46 625	10,257 50		04/21/94	220 000	9 125	2,007	8,250
180	AETNA INC	70.563	5,645 04	64	06/17/96	60 000	72 779	4,366	-132
					10/16/96	20 000	65 166	1,303	108
120	AMER STANDARD COMPANIES	38 313	4,597 56		08/08/97	50 000	50 000	2,500	-584
					09/09/97	40 000	42 625	1,705	-172
					11/13/97	30 000	38 226	1,146	3
250	AMER STORES CO NEW	20 563	5,140 75	90	03/04/96	120 000	14 750	1,770	697
					03/22/96	120 000	15 375	1 845	622
					12/08/97	10 000	20 823	208	2
50	AMERIN CORP	28 000	1,400 00		05/22/97	50 000	23 125	1,156	244
130	ASIA PULP & PAPER LTD SPONSORED ADR	9 875	1,283 75	5	05/03/95	130 000	11 375	1 478	-194
80	ATMEL CORP	18 563	1,485 04		10/28/97	80 000	26 459	2,116	-630
70	BIOGEN INC	36 375	2,546 25		06/03/97	70 000	32 625	2,283	263
20	BRIGGS & STRATTON CORP	48.563	971 26	22	12/08/97	20 000	51 607	1 032	-60
70	BRUNSWICK CORP	30 313	2,121 91	35	03/21/96	70 000	23 125	1,618	501
40	CASE CORP	60 438	2,417 52	8	02/24/97	40 000	52 000	2,080	337
50	CHASE MANHATTAN CORP NEW	109 500	5,475 00	124	02/28/94	30 000	37 750	1,132	2 153
					07/13/94	20 000	38 250	765	1,425
10	CIGNA CORP	172 375	1,723 75	33	11/06/97	10 000	160 687	1,606	117
15	CIRCUIT CITY STORES INC CIRCUIT CITY GROUP	35 563	533 44	2	12/24/97	15 000	34 252	513	20
80	CIT GROUP INC CL A	32 250	2,580 00		11/13/97	80 000	29 858	2,388	192
50	CITICORP	126 438	6,321 90	105	01/13/95	50 000	40 125	2 006	4 315

continued on page 4

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[redacted]

Common stock - continued

Total shares	Description	Price	Current value	Est annual income	Trade date	Shares purchased	Purchase price	Cost basis	Unrealized Gain/loss
60	DALLAS SEMICONDUCTOR CORP	40 750	2,445 00	8	04/02/96	60 000	19 000	1,140	1,305
90	DAYTON HUDSON CORP	67 500	3,375 00	36	12/18/95	50 000	24 750	1,237	2,138
40	DEERE AND CO	58 250	2,330 00	35	09/06/96	10 000	41 889	418	164
					01/08/97	30 000	42 125	1,263	484
20	EATON CORP	89 250	1,785 00	35	12/12/96	20 000	67 985	1,359	426
130	ECI TELECOM LTD	25 500	3,315 00	26	03/21/95	80 000	14 937	1,195	845
	ISRAEL				07/07/95	50 000	15 000	750	525
60	ELECTRONIC DATA SYS CORP NEW	43 938	2,636 28	36	09/11/97	60 000	36 832	2,209	427
220	EMC CORP MASS	27 438	6,036 36		09/11/95	120 000	9 875	1,185	2,107
					10/23/95	100 000	6 750	675	2,068
50	EXEL LTD ORD	63 375	3,168 75	80	01/14/94	10 000	22 437	224	409
	BERMUDA				07/13/94	40 000	18 125	725	1,810
80	FIRST UNION CORP	51 250	4 100 00	118	09/19/97	50 000	49 056	2,452	110
					11/07/97	30 000	50 423	1,512	25
60	FLUOR CORP	37 375	2,242 50	48	12/13/96	30 000	64 442	1,933	-811
					04/10/97	30 000	52 741	1,582	-460
70	GTECH HOLDINGS CORP	31 938	2,235 66		06/04/97	70 000	33 068	2 314	-78
40	HANNAFORD BROS CO	43 438	1,737 52	22	08/11/97	40 000	34 304	1 372	365
80	HILTON HOTELS CORP	29 750	2,380 00	26	12/10/97	80 000	28 248	2 259	121
80	HORMEL FOODS CORP	32 750	2,620 00	51	02/25/97	80 000	25 924	2,073	547
60	ILLINOIS CENTL CORP SR A	34 063	2,043 78	55	06/10/97	60 000	36 891	2,213	-169
80	IPC HOLDINGS LTD	32 187	2,574 96	102	06/24/97	80 000	26 875	2 150	424
60	KN ENERGY INC	54 000	3,240 00	67	06/09/94	60 000	23 000	1,380	1 860
70	LOCKHEED MARTIN CORP	98 500	6,895 00	112	04/30/96	20 000	80 312	1,606	364
					06/14/96	20 000	83 811	1 676	294
					02/20/97	30 000	89 076	2,672	283
160	LSI LOGIC CORP	19 625	3,140 00		01/02/96	80 000	33 570	2,685	1,115
					06/23/97	20 000	34 912	698	305
					07/03/97	60 000	31 237	1,874	-696
70	MATTEL INC	37 250	2,607 50	20	05/16/97	70 000	28 991	2,029	578
40	MCGRAW HILL COMPANIES INC	74 000	2,960 00	58	10/25/96	20 000	47 236	944	536
					12/16/96	20 000	44 875	897	583
251	MEDPARTNERS INC NEW	22 375	5,616 12		01/31/94	48 000	16 041	770	301
					03/24/94	12 000	15 833	190	78

(Continued on page 4)

[redacted]

Common stock - continued

Total shares	Description	Price	Current value	Est. annual income	Trade date	Shares purchased	Purchase price	Cost basis	Unrealized Gain/loss
					12/18/95	121 000	15 012	1,816	891
					01/24/97	70 000	19 000	1,330	236
50	MEMC ELECTR MATERIALS	15 250	762 50		11/20/95	50 000	29 740	1 487	-724
75	MERCANTILE BANCORPORATN INC (MO)	61 600	4,612 50	86	03/10/94	75 000	24 334	1 825	2,787
170	MORTON INTL INC NEW	34 375	5,843 75	82	11/03/95	47 000	24 400	1,146	469
					10/15/96	17 000	33 346	566	18
					12/12/96	40 000	25 385	1,167	414
					05/21/97	60 000	32 850	1 971	91
70	OM GROUP INC	36 625	2,563 75	22	04/25/97	70 000	26 750	1,872	691
30	PACIFICARE HEALTH SYSTEMS NEW CL B	52 375	1,571 25		02/06/97	30 000	74 989	2,249	-677
30	PARKER HANNIFIN CORP	45 875	1,376 25	18	08/28/96	30 000	25 886	776	600
140	PEP BOYS MANNY MOE&JACK	23 875	3,342 50		05/06/97	60 000	33 460	2,007	-574
					06/06/97	40 000	31 125	1,245	-290
					08/05/97	40 000	34 051	1,362	-407
40	REYNOLDS METALS CO	60 000	2,400 00	56	04/23/96	10 000	55 571	555	45
					06/04/96	30 000	54 261	1,627	173
40	SABRE GROUP HOLDINGS INC CL A	28 875	1,155 00		07/30/97	40 000	29 439	1,177	-22
70	SANTA FE INTL CORP	40 750	2,852 50	9	06/11/97	70 000	31 915	2,234	618
70	SYNOPSYS INC	35 750	2,502 50		09/15/97	70 000	32 965	2,307	195
160	TENET HEALTHCARE CORP	33 125	5,300 00		07/05/96	90 000	20 930	1,883	1,098
					08/22/96	30 000	21 500	645	348
					11/14/97	40 000	29 750	1,190	135
60	TRAVELERS PPTY CASUALTY	44 000	2,640 00	18	10/01/97	60 000	40 500	2 430	210
90	UCAR INTL INC	39 938	3,594 42		05/14/97	50 000	43 688	2,184	-187
					06/23/97	40 000	41 921	1,676	-78
100	ULTRAMAR DIAMOND SHAMROCK	31 875	3,187 50	110	09/25/96	60 000	29 625	1,777	135
					12/08/97	40 000	32 051	1,282	-7
100	UNION TEXAS PETE HLDGS INC	20 813	2,081 30	20	06/12/96	100 000	18 995	1,899	182
100	VASTAR RES INC	35 750	3,575 00	30	07/14/94	100 000	28 571	2,857	718
75	VESTA INSURANCE GROUP INC	59 375	4,453 12	11	06/23/94	75 000	18 666	1,400	3,053
60	WALLACE COMPUTER SRVCS INC	38 875	2,332 50	37	11/14/96	60 000	30 999	1,859	473
90	WASH MUTUAL INC	63 813	5,743 17	101	01/14/94	40 000	24 625	985	1,567

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Common stock - continued

Total shares	Description	Price	Current value	Est. annual income	Trade date	Shares purchased	Purchase price	Cost basis	Unrealized Gain/loss
					04/20/94	50.000	19.500	975	2,215
60	WEATHERFORD ENTERRA INC	43.750	2,625.00		12/05/97	60.000	47.961	2,877	-252
110	XEROX CORP	73.875	8,126.25	141	07/11/96	30.000	50.379	1,511	705
		[redacted]			08/27/96	30.000	55.777	1,673	543
					09/17/96	20.000	53.625	1,072	405
					10/29/96	30.000	46.259	1,387	829
100	ZEBRA TECHNOLOGIES CORP CL A	29.750	2,975.00		09/04/97	100.000	29.625	2,962	13
217	3COM CORP	34.938	7,581.54		02/21/97	87.000	34.339	2,987	52
					02/27/97	50.000	35.903	1,795	-48
					11/13/97	80.000	29.235	2,338	457
	Total		$ 212,927.40	2,184				162,674	50,238

Money funds

Description	Opening balance	Closing balance	Closing share price	Average yield	Dividend period	Days in period
SANSOM ST MNY MKT PRTFL	23,008.98	17,607.40	1.00	5.28%	11/21 - 12/21	31
Total	$ 23,008.98	$ 17,607.40				

Monthly activity

Cash flow

Date	Activity	Description	Amount
11/28		Balance forward	$ -.97
12/01	DIVIDEND	ADOBE SYSTEMS INC (DELAWARE) PAID ON 70	9.42
12/01	DIVIDEND	DALLAS SEMICONDUCTOR CORP PAID ON 60	2.10
12/01	DIVIDEND	VASTAR RES INC PAID ON 100	7.50
12/05	DIVIDEND	PARKER HANNIFIN CORP PAID ON 30	4.50
12/05	DIVIDEND	ULTRAMAR DIAMOND SHAMROCK PAID ON 60	16.50
12/08	DIVIDEND	MORTON INTL INC NEW PAID ON 170	20.40
12/10	DIVIDEND	AMER GREETINGS A PAID ON 100	10.00
12/10	DIVIDEND	DAYTON HUDSON CORP PAID ON 50	9.00
12/10	DIVIDEND	ELECTRONIC DATA SYS CORP NEW PAID ON 60	9.00

continued on page 6

Cash flow - continued

Date	Activity	Description	Amount
12/10	DIVIDEND	MCGRAW HILL COMPANIES INC PAID ON 40	14.40
12/15	DIVIDEND	BRUNSWICK CORP PAID ON 70	8.75
12/15	DIVIDEND	FIRST UNION CORP PAID ON 80	25.60
12/18	DIVIDEND	HANNAFORD BROS CO PAID ON 40	5.40
12/18	DIVIDEND	IPC HOLDINGS LTD PAID ON 80	25.40
12/22	DIVIDEND	WALLACE COMPUTER SRVCS INC PAID ON 60	9.30
12/23	DIVIDEND	SANSOM ST MONEY MKT FUND	90.72
12/30	DIVIDEND	IPC HOLDINGS LTD AS OF 12/18/97	80.00
12/30	DIVIDEND	KN ENERGY INC PAID ON 60	16.80
12/30	DIVIDEND	LOCKHEED MARTIN CORP PAID ON 70	28.00
		Proceeds from security transactions	$ 3,630.98
		Funds used for security transactions	$ -9,432.38
		Proceeds from money fund transactions	$ 9,462.95
		Funds used for money fund transactions	$ -4,061.37
12/31		Closing balance	$ .00

Security transactions

Date	Activity	Description	Quantity	Price / Value	Amount
12/02	SOLD	AMER GREETINGS A	-40.000	36.402800	$ 1,456.06
12/10	BOUGHT	WEATHERFORD ENTERRA INC	60.000	47.961100	2,877.67
12/11	BOUGHT	AMER STORES CO NEW	10.000	20.823000	208.24
12/11	BOUGHT	BRIGGS & STRATTON CORP	20.000	51.607800	1,032.16
12/11	BOUGHT	ULTRAMAR DIAMOND SHAMROCK	40.000	32.051400	1,282.06
12/12	BOUGHT	ADOBE SYSTEMS INC (DELAWARE)	30.000	41.952400	1,258.57
12/15	BOUGHT	HILTON HOTELS CORP	80.000	28.248800	2,259.90
12/24	SOLD	AMER GREETINGS A	-60.000	36.1/4	2,174.92
12/30	BOUGHT	CIRCUIT CITY STORES INC CIRCUIT CITY GROUP	15.000	34.252300	513.78
		Securities purchased			$ 9,432.38
		Securities sold			$ 3,630.98

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Money fund transactions

The Sansom Street Money Market Portfolio is your primary sweep fund

Date	Activity	Money fund	Amount
11/20		Opening Sansom St Money Market Prtfl	$ 23,008.98
12/01	SOLD	SANSOM MONEY MKT PORTFOLIO	-.97
12/02	BOUGHT	SANSOM MONEY MKT PORTFOLIO	19.02
12/03	BOUGHT	SANSOM MONEY MKT PORTFOLIO	1,456.06
12/08	BOUGHT	SANSOM MONEY MKT PORTFOLIO	21.00
12/09	BOUGHT	SANSOM MONEY MKT PORTFOLIO	20.40
12/10	SOLD	SANSOM MONEY MKT PORTFOLIO	-2,877.67
12/11	SOLD	SANSOM MONEY MKT PORTFOLIO	-2,472.06
12/12	SOLD	SANSOM MONEY MKT PORTFOLIO	-1,258.57
12/15	SOLD	SANSOM MONEY MKT PORTFOLIO	-2,259.90
12/16	BOUGHT	SANSOM MONEY MKT PORTFOLIO	34.35
12/19	BOUGHT	SANSOM MONEY MKT PORTFOLIO	30.80
12/23	BOUGHT	SANSOM MONEY MKT PORTFOLIO	9.30
12/23	BOUGHT	SANSOM MONEY MKT PORTFOLIO	90.72
12/26	BOUGHT	SANSOM MONEY MKT PORTFOLIO	2,174.92
12/30	SOLD	SANSOM MONEY MKT PORTFOLIO	-513.78
12/30	SOLD	SANSOM MONEY MKT PORTFOLIO	-80.00
12/31	BOUGHT	SANSOM MONEY MKT PORTFOLIO	124.80
12/31	BOUGHT	SANSOM MONEY MKT PORTFOLIO	80.00
12/31		Closing Sansom St Money Market Prtfl	$ 17,607.40
		Money funds purchased	$ 4,061.37
		Money funds sold	$ -9,462.95

Preliminary 1997 Realized Gains/Losses

Estimated 1997 realized gains/losses for transactions with trade dates through 12/31/97 have been incorporated into this statement. Corrections and adjustments may be made in January which may change the information provided below. Regulated futures held in the account on 12/31/97 must be marked to the market. Mark-to-market realized entries will appear on your January statement as well as your 1997 Year-End Summary mailed in February. This information can be used for tax and investment planning but should not be used for tax filing purposes and may not be a complete listing. The Taxpayer Relief Act of 1997 provides advantageous tax treatment for capital gains on assets held for and sold during specific time periods. Capital gain rates vary, and are subject to special transition rules for 1997. Consult your tax advisor for details. This is not a tax reporting document. Tax lots are usually handled first to calculate gains/losses (first-in, first-out or FIFO accounting method) unless you specified which lot to close when you placed your order (a process known as "specific lot identification"). Adjustments to cost basis may also change information for a position opened and closed during the current month. Gains/losses may not appear for all capital changes and are not calculated for zero coupon securities. Cost basis for tax-exempt and AMT-eligible tax-exempt municipal securities has been adjusted automatically for estimated amortization of bond premiums.

Security description	Method	Quantity/ Face value	Purchase date	Sale date	Sale amount	Purchase amount	Loss	Gain	Be gain/loss
Short-term gains/losses realized before 5/7/97 held one year or less									
MALLINCKRODT INC NY NEW	FIFO	70.000	03/01/96	01/31/97	$ 2,884.31	$ 2,695.00		$ 189.31	
TENET HEALTHCARE CORP	FIFO	40.000	07/05/96	05/06/97	1,050.99	837.20		213.79	
Total					$ 3,935.30	$ 3,532.20		$ 403.10	$ 403.10
Long-term gains/losses realized before 5/7/97 held more than one year, or realized after 7/28/97 held more than one year but not more than 18 months									
ADOBE SYSTEMS INC	FIFO	50.000	03/06/96	05/05/97	$ 2,258.06	$ 1,626.58		$ 631.48	
(DELAWARE)	FIFO	10.000	03/19/96	05/05/97	451.61	341.25		110.36	
AUTODESK INC	FIFO	30.000	02/15/96	04/04/97	1,015.06	1,074.36	-59.30		
CASL CORP	FIFO	40.000	09/26/96	10/31/97	2,395.02	1,920.00		475.02	
	FIFO	20.000	11/18/96	11/20/97	1,260.88	973.56		287.32	

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Preliminary 1997 Realized Gains/Losses - continued

Security description	Method	Quantity/ Face value	Purchase date	Sale date	Sale amount	Purchase amount	Loss	Gain	N gain/l
CIRCUIT CITY STORES INC	FIFO	10.000	11/03/95	04/15/97	380 44	328 75		51 69	
CIRCUIT CITY GROUP	FIFO	50.000	11/16/95	04/15/97	1,902 19	1,541 67		360 52	
DALLAS SEMICONDUCTOR CORP	FIFO	40.000	04/02/96	05/05/97	1,547 63	760 00		787 63	
DEERE AND CO	FIFO	30 000	09/06/96	10/31/97	1,561 88	1,256 67		305 21	
EMC CORP MASS	FIFO	40 000	09/11/95	01/23/97	1,524 94	790 00		734 94	
EVEREST REINS HOLDINGS INC	FIFO	50 000	10/24/95	03/13/97	1,618 69	954 99		663 70	
EXEL LTD ORD BERMUDA	FIFO	50 000	01/14/94	03/06/97	2,149 92	1,121 88		1,028 04	
LSI LOGIC CORP	FIFO	40 000	12/20/95	03/18/97	1,394 20	1,322 26		71 94	
	FIFO	10 000	12/20/95	05/05/97	416 65	330 56		86 09	
	FIFO	20 000	01/02/96	05/05/97	833 31	671 41		161 90	
NORTHROP GRUMMAN CORP	FIFO	40 000	07/11/96	10/13/97	4,844 83	2,635 00		2,209 83	
PARKER HANNIFIN CORP	FIFO	30 000	08/28/96	11/03/97	1,248 77	776 59		472 18	
REYNOLDS METALS CO	FIFO	20 000	04/23/96	04/30/97	1,351 58	1,111 43		240 15	
RIVAL COMPANY	FIFO	80 000	01/13/95	04/16/97	1,709 94	1,350 00		359 94	
TUPPERWARE CORP	FIFO	60 000	04/19/94	03/12/97	2,232 68	1,496 51		736 17	
WELLPOINT HEALTH NETWORKS INC NEW (DELAWARE)	FIFO	93 000	06/28/94	04/30/97	3,896 73	3,790 55		106 18	
	FIFO	7 000	08/01/94	04/30/97	293 30	234 45		58 85	
WMX TECHNOLOGIES INC NAME CHANGE 1997	FIFO	60.000	03/06/96	05/06/97	1,800 00	1,729 00		71 00	
Total					$ 38,088.31	$ 28,137.87	$ -59.30	$ 10,009.74	$ 9,950 44

Short-term gains/losses realized after 5/6/97 held one year or less:

ACCESS HEALTH INC	FIFO	60 000	04/04/97	07/18/97	$ 1,723 54	$ 847 50		$ 876 04	
	FIFO	80 000	04/04/97	07/22/97	2,269 92	1,130 00		1,139 92	
AMER GREETINGS A	FIFO	40 000	12/20/96	11/26/97	1,456 06	1,088 33		367 73	
	FIFO	60.000	12/20/96	12/19/97	2,174 92	1,632 50		542 42	
AUTODESK INC	FIFO	20 000	06/25/96	06/18/97	758 33	649 65		108 68	
AUTOLIV INC	FIFO	6 000	10/15/96	06/26/97	230 62	231 57	- 95		
	FIFO	15 000	12/12/96	06/26/97	576 56	460 75		115 81	

Continued on page 9

Preliminary 1997 Realized Gains/Losses - continued

Security description	Method	Quantity/ Face value	Purchase date	Sale date	Sale amount	Purchase amount	Loss	Gain	N gain/loss
	FIFO	40 000	05/19/97	06/26/97	$ 1,537 49	$ 1,520 05		17 44	
COLUMBIA HCA HEALTHCARE CORP	FIFO	50 000	03/31/97	10/10/97	1,426 63	1,676 12	-249 49		
	FIFO	40 000	05/28/97	10/10/97	1,141 30	1,480 00	-338 70		
	FIFO	30 000	06/28/97	10/22/97	919 19	1,110 00	-190 81		
	FIFO	60 000	07/21/97	10/22/97	1,838 38	1,909 39	-71 01		
COMPUTER ASSOC INTL INC	FIFO	40 000	01/14/97	07/15/97	2,591 48	1,855 00		736 48	
	FIFO	20 000	01/14/97	11/18/97	1,480 49	927 50		552 99	
	FIFO	20 000	01/30/97	11/18/97	1,480 49	930 00		550 49	
EATON CORP	FIFO	20 000	12/12/96	11/20/97	1,869 71	1,359 72		509 99	
MCGRAW HILL COMPANIES INC	FIFO	20 000	10/25/96	07/02/97	1,200 56	944 73		255 83	
OCTEL COMMUNICATIONS CRP *MERGER 1997	FIFO	100 000	12/19/96	08/13/97	3,031 14	1,789 58		1 241 56	
PARKER HANNIFIN CORP	FIFO	30 000	08/28/96	05/19/97	1,541 13	1,164 88		376 25	
PHARMACIA & UPJOHN INC	FIFO	40 000	03/13/97	05/23/97	1,391 73	1,549 65	-157 92		
	FIFO	60 000	03/13/97	06/12/97	2,002 56	2,324 47	-321 91		
Total					$ 32,642 23	$ 26,581 39	$ -1,330 79	$ 7,391 63	$ 6,060 84

Long-term gains/losses realized 5/7/97 through 7/28/97 held more than one year, or realized after 7/28/97 held more than 18 months.

APRIA HEALTHCARE GROUP INC	FIFO	150 000	11/06/95	09/17/97	$ 2,155 12	$ 4,121 25	$ -1,966 13	
AUTODESK INC	FIFO	20 000	02/15/96	06/18/97	758 33	716 24		42 09
	FIFO	60 000	06/25/96	06/27/97	2,340 80	1,948 96		391 84
AUTOLIV INC	FIFO	16 000	11/03/95	06/26/97	614 99	451 84		163 15
EMC CORP MASS	FIFO	20 000	09/11/95	09/16/97	1,116 64	395 00		721 64
EVEREST REINS HOLDINGS INC	FIFO	70 000	10/24/95	06/17/97	2,489 29	1,336 99		1 152 30
GREENFIELD INDS INC DEL MERGER 1997	FIFO	50 000	04/22/94	11/18/97	1,900 00	968 75		931 25
LIVING CENTERS OF AMER INC *MERGER 1997*	FIFO	60 000	07/11/95	05/22/97	2,257 42	1,635 00		622 42
REYNOLDS METALS CO	FIFO	20 000	04/23/96	11/13/97	1,160 59	1 111 43		49 16

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Preliminary 1997 Realized Gains/Losses - continued

Security description	Method	Quantity/ Face value	Purchase date	Sale date	Sale amount	Purchase amount	Loss	Gain	N gain/lo
ROOSEVELT FINCL GROUP INC	FIFO	59 000	03/10/94	07/09/97	1,298 00	889 92		408 08	
SARA LEE CORP	FIFO	80 000	05/28/96	05/29/97	3,299 89	2,643 20		656 69	
Total					$ 19,391.07	$ 16,218.58	$ -1,966.13	$ 5,138 62	$ 3,172 49
Net capital gains/losses									$ 19,586 87

Year-to-date realized capital gain/loss totals

Short-term gains/losses realized before 5/7/97 held one year or less	$ 403 1[illegible]
Long-term gains/losses realized before 5/7/97 held more than one year, or realized after 7/28/97 held more than one year but not more than 18 months	$ 9,950 4[illegible]
Short-term gains/losses realized after 5/6/97 held one year or less	$ 6,060 8[illegible]
Long-term gains/losses realized 5/7/97 through 7/28/97 held more than one year, or realized after 7/28/97 held more than 18 months	$ 3,172 49
Net year-to-date capital gains/losses	$ 19,586 87

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December 1997

PAINEWEBBER ACCESS
Individual Retirement Rollover Account

PAINEWEBBER INC
ONE INDEPENDENT DRIVE
JACKSONVILLE, FL 32202-5081

[redacted]

Net account value on November 28	$	250,402.24
Net account value on December 31	$	254,501.59
Money funds in 12/31 value	$	11,227.80

* Excludes unpriced assets. See back for details

PaineWebber
Retirement Account

Account Number [redacted]
Social Security Number [redacted]

Your Investment Executive

[redacted]

L BUCK FOWLER
NWQ ACCESS
4730 PRINCE EDWARD ROAD
JACKSONVILLE FL 32210-8118

Activity summary

Account value on November 28		$ 250,402.24
Cash flow		
Earnings / capital return	+ 453.43	
Proceeds from security transactions	- 35.53	
Security transactions *(Excludes Money fund transactions.)*		
Change in value of investments	+ 3,610.39	
Account value on December 31		$ 254,501.59

Earnings and capital return summary

Earnings/capital return categories are for the current calendar year. All prior year entries are summarized separately.
This information should not be used for tax purposes. See back for details.

	Current period	Year to date
PaineWebber Money fund dividends	$ 48.74	$ 575.77
Other dividends	404.69	3,328.78
Total earnings / capital return	$ 453.43	$ 3,904.55
Prior year(s) entries and adjustments	.00	11.80

Asset summary

See reverse side for information on assets excluded from this summary.

	% of portfolio	Value
Equities	95.58	243,273.79
Money funds	4.42	11,227.80
Total invested assets	100.00	$ 254,501.59
Net account value		$ 254,501.59

Account instructions
Your PaineWebber ACCESS account is managed by NWQ EQUITY
PaineWebber is your IRA Rollover custodian

Bulletin Board
IF YOU DO NOT HOLD OUTSIDE ASSETS
1) RETAIN THIS STMT FOR 1997 YEAR-END VALUE.
2) THIS INFO IS BEING FURNISHED TO THE IRS.
3) NET ACCT VALUE + ANNUITIES = TOTAL VALUE

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[redacted]

PaineWebber
Retirement Account

Investment objectives

Investment objectives describe the general goals you have for your investments within an account. We understand that the investment objective(s) for this account are the following, in order of priority:

1 Growth | 2 Income | 3 Investment grade | 4 Speculation

If you have any questions concerning these investment objectives or wish to change the investment objectives for this account, call your Investment Executive or Branch Manager for your branch office.

Asset portfolio

When available, prices, income and current values may be approximate and thus gains/losses may not be accurately reflected. Details on back. An asterisk (*) indicates a change in the original transaction data from the prior month or the display of new data input at your branch office. Gains/losses are not calculated for zero coupon investments.

Equities

Common stock

Total shares	Description	Price	Current value	Est. annual income	Trade date	Shares purchased	Purchase price	Cost basis	Unrealized gain/loss
66	AETNA INC	70.563	4,657.15	53	03/27/97	50.000	87.963	4,398	869
					06/27/97	16.000	104.000	1,664	-534
60	AIR PROD & CHEMICAL INC	82.250	4,935.00	72	01/14/94	30.000	46.750	1,402	1,065
					12/22/95	30.000	51.750	1,552	915
70	ALLSTATE CORP	90.500	6,335.00	67	06/07/96	40.000	44.722	1,788	1,832
					08/18/97	30.000	73.250	2,197	518
100	ALUMAX INC	34.250	3,425.00		03/15/95	100.000	25.367	2,536	889
90	AMER INTL GROUP INC	108.750	9,787.50	27	03/07/94	67.000	38.395	2,572	4,714
					04/26/96	23.000	59.266	1,363	1,138
45	AMR CORP DEL	128.500	5,782.50		01/17/97	25.000	84.125	2,103	1,109
					08/18/97	20.000	103.250	2,065	505
70	BANK OF N Y CO INC	57.813	4,046.91	73	06/21/96	70.000	25.636	1,794	2,252
50	BJ SERVICES COMPANY	71.938	3,596.90		02/11/97	50.000	41.764	2,088	1,508
90	BOEING COMPANY	48.938	4,404.42	50	01/26/96	40.000	38.625	1,545	412
					03/07/96	50.000	40.000	2,000	446
30	BURLINGTON NTHN SANTA FE CORP	92.938	2,788.14	36	01/14/94	30.000	59.875	1,796	992
45	CASE CORP	60.438	2,719.71	9	11/15/95	45.000	35.625	1,603	1,116
180	CATERPILLAR INC	48.500	8,730.00	180	01/14/94	180.000	22.593	4,066	4,664
50	CHAMPION INTL CORP	45.313	2,265.65	10	11/13/95	50.000	48.139	2,406	140
65	CHASE MANHATTAN CORP NEW	109.500	7,117.50	161	10/07/96	25.000	81.250	2,031	706

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Common stock - continued

Total shares	Description	Price	Current value	Est annual income	Trade date	Shares purchased	Purchase price	Cost basis	Unrealized gain/loss
					01/03/97	20 000	87 625	1,752	438
					04/01/97	20 000	94 375	1,887	303
95	COASTAL CORP DEL	61 938	5,884 11	38	01/14/94	95 000	28 000	2,660	3,224
97	COLUMBIA HCA HEALTHCARE CORP	29 625	2,873 62	8	07/24/96	97 000	33 532	3,252	-378
95	COOPER INDUST	49 000	4,655 00	125	01/14/94	80 000	50 750	4,060	-140
					11/14/95	15 000	33 875	508	227
150	DEERE AND CO	58 250	8,737 50	132	01/14/94	150 000	25 625	3,843	4,894
55	DELTA AIR LINES COM	119 000	6,545 00	11	01/17/97	25 000	78 248	1,956	1,019
					07/07/97	30 000	89 239	2,677	893
70	DIAMOND OFFSHORE DRILLING INC	48 125	3,368 75	20	02/20/97	70 000	32 244	2 257	1,111
100	DRESSER INDUSTRIES	41 938	4,193 80	76	09/13/94	100 000	20 375	2,037	2,156
80	DU PONT DE NEMOURS	60.063	4,805 04	101	01/14/94	80 000	26 062	2,085	2,720
130	EMERSON ELECTRIC CO	56 438	7,336 94	153	01/14/94	130 000	31 375	4,078	3,258
55	EXIDE CORP	25 875	1,423 12	4	02/27/96	55 000	30 938	1,701	-277
120	FEDERATED DEPARTMENT STORES INC NEW	43 063	5,167 56		11/21/96	120 000	33 082	3,969	1,198
105	FIRST UNION CORP	51 250	5,381 25	155	09/23/97	105 000	50 182	5,269	112
105	GENL MOTORS CORP	60 750	6,378 75	210	01/14/94	45 000	61 125	2,750	-16
					08/15/96	60 000	51 451	3 087	558
260	HALLIBURTON CO (HOLDING COMPANY)	51 875	13,487 50	130	01/14/94	260 000	15 360	3 993	9,494
115	IMC GLOBAL INC	32 750	3,766 25	37	01/14/94	110 000	23 437	2 578	1,024
					09/19/96	5 000	40 000	200	-36
180	INGERSOLL RAND	40 500	7,290 00	108	01/14/94	105 000	25 500	2,677	1 575
					01/03/95	75 000	21 036	1,577	1,460
70	LOEWS CORP	106 125	7,428 75	70	10/22/96	45 000	80 869	3,639	1 136
					10/30/96	25 000	81 769	2 044	609
165	NATL CITY CORP	65 750	10,848 75	304	01/14/94	165 000	25 000	4,125	6,723
250	NORWEST CORP	38 750	9,687 50	165	01/14/94	250 000	12 250	3 062	6 625
6	RAYTHEON CO CL A	49 375	296 25	5		6 000	This information was unavailable		
60	REYNOLDS METALS CO	60 000	3,600 00	84	01/14/94	55 000	48 750	2 681	619
					06/01/95	5 000	48 745	243	57
160	TEXAS INSTRUMENTS	45 000	7,200 00	54	01/14/94	160 000	18 250	2 920	4 280
80	TEXTRON INC	62 500	5,800 00	80	08/13/97	40 000	64 414	2,576	76

Items 3 on page 4

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Common stock - continued

Total shares	Description	Price	Current value	Est annual income	Trade date	Shares purchased	Purchase price	Cost basis	Unrealized Gain/loss
					10/10/97	40 000	63 584	2,543	-43
100	TIME WARNER INC	62 000	6,200 00	36	06/05/97	100 000	46 489	4,648	1 552
210	U S WEST MEDIA GROUP	28 875	6,063 75		02/12/97	110 000	19 411	2,135	1,041
		[illegible]			06/11/97	100 000	22 000	2,200	617
48	UNILEVER N V N Y SHS NETHERLANDS SPON	62 438	2,997 02	41	12/02/96	48 000	42 569	2 042	955
110	UNION PAC RESOURCES GROUP INC	24 250	2,667 50	22	09/18/97	110 000	24 795	2 727	-59
80	UNTD TECHNOLOGIES CORP	72 813	5,825 04	99	01/14/94	80 000	32 250	2,580	3 245
65	USX-U S STEEL GROUP	31 250	2,031 25	65	01/14/94	65 000	42 500	2,762	-730
70	W R GRACE & CO DEL	80 438	5 630 66	41	10/17/96	45 000	93 312	2 399	1,220
						25 000	This information was unavailable		
80	XEROX CORP	73 875	5,910 00	102	10/31/96	40 000	46 347	1,853	1,102
					11/05/96	40 000	45 625	1,825	1,130
	Total		$ 243,272.04	3,214				152,826	88,128

Preferred stock

Total shares	Description	Price	Current value	Est annual income	Trade date	Shares purchased	Purchase price	Cost basis	Unrealized Gain/loss
25	FRESENIUS NATL MED CARE INC CL D PREFERRED	070	1 75			25 000	This information was unavailable		
	Total		$ 1 75						

Money funds

Description	Opening balance	Closing balance	Closing share price	Average yield	Dividend period	Days in period
SANSOM ST MNY MKT PRTFL	10,738 84	11,227 80	1 00	5 28%	11/21 - 12/21	31
Total	$ 10,738 84	$ 11,227.80				

Monthly activity

Cash flow

Date	Activity	Description	Amount
1/28		Balance forward	$ .00

Date	Activity	Description	Amount
12/01	DIVIDEND	COLUMBIA HCA HEALTHCARE CORP PAID ON 97	1 94

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Continued on page 5

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PaineWebber
Retirement Account Statement

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Cash flow - continued

Date	Activity	Description	Amount
12/01	DIVIDEND	DELTA AIR LINES COM PAID ON 55	2 75
12/01	DIVIDEND	DIAMOND OFFSHORE DRILLING INC PAID ON 70	4 90
12/01	DIVIDEND	INGERSOLL RAND PAID ON 180	27 00
12/01	DIVIDEND	LOEWS CORP PAID ON 70	17 50
12/01	DIVIDEND	NORWEST CORP PAID ON 250	41 25
12/05	DIVIDEND	BOEING COMPANY PAID ON 90	12 60
12/09	DIVIDEND	W R GRACE & CO DEL PAID ON 70	10 15
12/10	DIVIDEND	EMERSON ELECTRIC CO PAID ON 130	38 35
12/10	DIVIDEND	GENL MOTORS CORP PAID ON 105	52 50
12/10	DIVIDEND	UGX-U S STEEL GROUP PAID ON 65	16 25
12/10	DIVIDEND	UNTD TECHNOLOGIES CORP PAID ON 80	24 80
12/15	DIVIDEND	DU PONT DE NEMOURS PAID ON 80 AS OF 12/13/97	25 20
12/15	DIVIDEND	FIRST UNION CORP PAID ON 105	33 60
12/15	DIVIDEND	TIME WARNER INC PAID ON 100	9 00
12/16	DIVIDEND	EXIDE CORP PAID ON 55	1 10
12/19	DIVIDEND	AMER INTL GROUP INC PAID ON 90	6 75
12/19	CASH IN LIEU	RAYTHEON CO CL A	35 53
12/19	DIVIDEND	UNILEVER N V N Y SHS NETHERLANDS SPON	18 35
12/22	DIVIDEND	DRESSER INDUSTRIES PAID ON 100	19 00
12/23	DIVIDEND	HALLIBURTON CO (HOLDING COMPANY) PAID ON 260	32 50
12/23	DIVIDEND	SANSOM ST MONEY MKT FUND	48 74
12/30	DIVIDEND	IMC GLOBAL INC PAID ON 115	9 20
		Proceeds from security transactions	**$ 35.53**
		Funds used for money fund transactions	**$ -488.96**
12/31		Closing balance	$ .00

Security transactions

Date	Activity	Description	Quantity	Price / Value	Amount
12/19	SPIN OFF	RAYTHEON CO CL A	6.000		

[redacted]

Money fund transactions

The Sansom Street Money Market Portfolio is your primary sweep fund

Date	Activity	Money fund	Amount
11/28		Opening Sansom St Money Market Prtfl	$ 10,738 84
12/02	BOUGHT	SANSOM MONEY MKT PORTFOLIO	95 34
12/08	BOUGHT	SANSOM MONEY MKT PORTFOLIO	12 60
12/10	BOUGHT	SANSOM MONEY MKT PORTFOLIO	10 15
12/11	BOUGHT	SANSOM MONEY MKT PORTFOLIO	131 90
12/16	BOUGHT	SANSOM MONEY MKT PORTFOLIO	67 80
12/17	BOUGHT	SANSOM MONEY MKT PORTFOLIO	1 10
12/22	BOUGHT	SANSOM MONEY MKT PORTFOLIO	60 63
12/23	BOUGHT	SANSOM MONEY MKT PORTFOLIO	19 00
12/23	BOUGHT	SANSOM MONEY MKT PORTFOLIO	48 74
12/24	BOUGHT	SANSOM MONEY MKT PORTFOLIO	32 50
12/31	BOUGHT	SANSOM MONEY MKT PORTFOLIO	9 20
12/31		Closing Sansom St Money Market Prtfl	$ 11,227 80
		Money funds purchased	$ 488 96

Preliminary 1997 Realized Gains/Losses

Estimated 1997 realized gains/losses for transactions with trade dates through 12/31/97 have been incorporated into this statement. Corrections and adjustments may be made in January which may change the information provided below. Regulated futures held in the account on 12/31/97 must be marked to the market. Mark-to-market realized entries will appear on your January statement as well as your 1997 Year End Summary mailed in February. This information can be used for tax and investment planning but should not be used for tax filing purposes and may not be a complete listing. The Taxpayer Relief Act of 1997 provides advantageous tax treatment for net capital gains on assets held for and sold during specific time periods. Capital gain rates vary, and are subject to special transition rules for 1997. Consult your tax advisor for details. This is not a tax reporting document. The cost of security lots liquidated first to calculate gains/losses (first-in, first-out or FIFO accounting method) unless you specified which lot to close when you placed your order (a versus purchase or VSP order). An asterisk (*) indicates a manual change in information or a position opened and closed during the current month. Gains/losses may not adjust for all capital changes and are not calculated for zero coupon securities. Cost basis for tax exempt and AMT eligible coupon municipal securities has been adjusted automatically for estimated amortization of bond premiums.

Security description	Method	Quantity/ Face value	Purchase date	Sale date	Sale amount	Purchase amount	Loss	Gain	Net gain/loss
Long-term gains/losses realized before 5/7/97 held more than one year, or realized after 7/28/97 held more than one year but not more than 18 months									
AIR PROD & CHEMICAL INC	FIFO	30 000	01/14/94	03/11/97	$ 2,212 42	$ 1,402 50		$ 809 92	
AMP INCORPORATED	FIFO	80 000	01/14/94	01/31/97	3,243 88	2,505 00		738 88	
CYPRUS AMAX MINERALS CO	FIFO	30 000	12/14/94	03/11/97	734 97	772 50	-37 53		
	FIFO	50 000	12/20/94	03/11/97	1,224 96	1,275 00	-50 04		
DOW CHEMICAL	FIFO	45 000	07/11/95	01/16/97	3,663 03	3,375 00		288 03	
ECHLIN INC	FIFO	45 000	11/14/95	02/24/97	1,510 25	1,608 75	-98 50		
GENL RE CORP	FIFO	25 000	01/14/94	02/04/97	4,135 23	2,621 88		1,513 35	
HONEYWELL INC	FIFO	70 000	05/28/96	08/05/97	5,327 27	3,673 98		1,653 29	
WEYERHAEUSER CO	FIFO	55 000	01/14/94	04/24/97	2,546 71	2,633 13	-86 42		
	FIFO	10 000	05/18/94	04/24/97	463 04	408 99		54 05	
Total					$ 25,061 76	$ 20,276 73	$ -272 49	$ 5,057 52	$ 4,785 03
Short-term gains/losses realized after 5/6/97 held one year or less:									
NEWMONT MINING CORP	FIFO	90 000	06/03/97	07/17/97	$ 3,228 64	$ 3,424 61	$ -195 97		

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Preliminary 1997 Realized Gains/Losses - continued

Security description	Method	Quantity/ Face value	Purchase date	Sale date	Sale amount	Purchase amount	Loss	Gain	Net gain/loss
Total					$ 3,228.64	$ 3,424.61	$ -195.97		$ -195.97

Long-term gains/losses realized 5/7/97 through 7/28/97 held more than one year, or realized after 7/28/97 held more than 18 months:

GENL ELECTRIC CO	FIFO	55.000	04/14/94	07/08/97	$ 3,822.37	$ 1,460.94	$ 2,361.43	
	FIFO	65.000	01/14/94	09/03/97	4,361.72	1,726.56	2,635.16	
	FIFO	40.000	01/14/94	09/17/97	2,769.90	1,062.50	1,707.40	
GTE CORPORATION	FIFO	115.000	01/14/94	06/10/97	5,217.95	3,996.25	1,221.70	
MINNESOTA MNG MFG	FIFO	45.000	01/14/94	06/03/97	4,112.25	2,377.46	1,734.79	
	FIFO	25.000	01/14/94	07/07/97	2,551.53	1,320.81	1,230.72	
NORWEST CORP	FIFO	40.000	01/14/94	07/08/97	2,372.42	980.00	1,392.42	
Total					$ 25,208.14	$ 12,924.52	$ 12,283.62	$ 12,283.62
Net capital gains/losses								$ 16,072.68

Year-to-date realized capital gain/loss totals

Long-term gains/losses realized before 5/7/97 held more than one year, or realized after 7/28/97 held more than one year but not more than 18 months	$ 4,785.03
Short-term gains/losses realized after 5/6/97 held one year or less	$ -195.97
Long-term gains/losses realized 5/7/97 through 7/28/97 held more than one year or realized after 7/28/97 held more than 18 months	$ 12,283.62
Net year-to-date capital gains/losses	$ 16,872.68

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December 1997

PAINEWEBBER ACCESS
Individual Retirement Rollover Account

PAINEWEBBER INC
ONE INDEPENDENT DRIVE
JACKSONVILLE, FL 32202-5081

[redacted]

Net account value on November 28 $ 117,221.75
Net account value on December 31 $ 117,320.68
Cash/Money funds in 1,931 value $ 3,828.58

* Excludes unpriced assets. See back for detail.

PaineWebber
Retirement Account

Account Number [redacted]
Social Security Number [redacted]

Your Investment Executive

[redacted]

L BUCK FOWLER
4730 PRINCE EDWARD ROAD
JACKSONVILLE FL 32210-8118

Activity summary

Account value on November 28		$ 117,221.75
Cash flow		
Earnings / capital return	+ 47.97	
Proceeds from security transactions	+ 1,945.37	
Funds used for security transactions	-1,839.16	
Security transactions *(Excludes Money fund transactions)*		
Securities purchased	+ 1,839.16	
Securities sold	-1,945.37	
Change in value of investments	+ 50.96	
Account value on December 31		$ 117,320.68

Earnings and capital return summary

Earnings/capital return categories are for the current calendar year. All prior year entries are summarized separately. This information should not be used for tax purposes. See back for details.

	Current period	Year to date
PaineWebber Money fund dividends	$ 9.52	$ 181.23
Other dividends	38.45	328.85
Total earnings / capital return	$ 47.97	$ 510.08
Prior year(s) entries and adjustments	.00	0.16

Investment objectives

Investment objectives describe the general goals you have for your investments within an account. We understand that the investment objective(s) for this account are the following, in order of priority:

1 Growth 2 Income 3 Investment grade 4 Speculation

If you have any questions concerning these investment objectives, or wish to change the investment objectives for this account, call your Investment Executive or Branch Manager for your branch office.

[redacted]

Account instructions
Your PaineWebber ACCESS account is managed by
GD BJURMAN-EQ
PaineWebber is your IRA Rollover custodian

Bulletin Board
IF YOU DO NOT HOLD OUTSIDE ASSETS
1) RETAIN THIS STMT FOR 1997 YEAR-END VALUE.
2) THIS INFO IS BEING FURNISHED TO THE IRS
3) NET ACCT VALUE = ANNUITIES + TOTAL VALUE

Asset summary

See reverse side for information on assets excluded from this summary.

	% of portfolio	Value
Equities	96.84	113,492.10
Money funds	3.16	3,699.21
Total invested assets	100.00	$ 117,191.31
Plus cash balance		129.37
Net account value		$ 117,320.68

[redacted]

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PaineWebber
Retirement Account

[redacted]

Asset portfolio

When available, prices, income and current values may be approximate and thus gains/losses may not be accurately reflected. Details on back. An asterisk (*) indicates a change in the original transaction data from the prior month or the display of new data input at your branch office. Gains/losses are not calculated for zero coupon investments.

Equities

Common stock

Total shares	Description	Price	Current value	Est. annual income	Trade date	Shares purchased	Purchase price	Cost basis	Unrealized Gain/loss
40	AIRBORNE FREIGHT CORP	62 125	2,485 00	12	09/05/97	15 000	53 125	796	135
					09/09/97	25 000	55 713	1,392	161
70	AIRTOUCH COMMUNICATIONS	41 563	2,909 41		08/07/97	60 000	36 313	2,178	315
	INC DELA				08/26/97	10 000	35 062	350	65
60	CISCO SYS INC	55 750	3,345 00		09/18/95	60 000	16 083	965	2 380
70	CNF TRANSN INC	38 750	2,712 50	28	05/09/97	50 000	29 864	1,493	444
					05/12/97	5 000	29 750	148	45
					05/13/97	15 000	29 375	440	141
60	CYMER INC	15 000	900 00		09/05/97	60 000	44 175	2,650	-1,750
70	DEAN FOODS CO	59 750	4,182 50	56	10/10/96	15 000	29 615	444	452
					10/11/96	25 000	30 253	756	737
					10/14/96	15 000	29 847	447	449
					10/15/96	15 000	29 750	446	450
60	DIAMOND OFFSHORE DRILLING INC	48 125	2,887 50	17	09/18/96	20 000	28 058	561	401
					09/23/96	40 000	26 375	1 055	870
50	ELECTRONICS FOR IMAGING INC	16 625	831 25		10/06/97	5 000	50 926	254	-170
					10/08/97	15 000	52 440	786	-536
					10/09/97	10 000	52 782	527	-360
					10/15/97	20 000	53 812	1 076	-743
100	EMC CORP MASS	27 438	2 743 80		07/03/97	40 000	20 030	801	296
					07/07/97	40 000	20 711	828	269
					07/21/97	20 000	22 719	454	94
50	EVI INC	51 750	2,587 50		09/05/97	10 000	53 833	538	-20
					09/08/97	40 000	54 620	2 184	-114
130	FURNITURE BRANDS INTL INC	20 500	2,665 00		04/08/97	30 000	15 750	472	141
					04/09/97	20 000	15 975	319	91
					04/10/97	20 000	15 774	315	95
					04/11/97	15 000	15 824	237	70

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Common stock - continued

Total shares	Description	Price	Current value	Est annual income	Trade date	Shares purchased	Purchase price	Cost basis	Current gain/loss
					04/17/97	25 000	15 875	396	116
					04/18/97	15 000	16 000	240	67
					04/21/97	5 000	15 625	78	24
30	GENESIS HEALTH VENTURES INC	26 750	802 50		05/23/96	10 000	31 625	316	48
					05/29/96	20 000	32 250	645	119
50	GENL NUTRITION COS INC	34 000	1,700 00		11/10/97	35 000	31 853	1,114	76
					11/11/97	5 000	32 000	160	10
					11/17/97	5 000	33 000	165	5
					11/20/97	5 000	34 125	170	
100	GLOBAL MARINE NEW	24 563	2,456 30		01/12/96	30 000	8 750	262	474
					01/15/96	10 000	8 125	81	164
					01/16/96	20 000	7 875	157	334
					01/17/96	30 000	8 000	240	496
					07/23/96	10 000	15 125	151	94
80	HBO & CO GA	48 000	3,840 00	6	05/08/96	80 000	27 805	2 224	1,616
135	HEALTH MGMT ASSN INC NEW CL A	25 250	3,408 75		04/17/96	135 000	14 613	1,972	1,436
50	HERMAN MILLER INC	54 563	2,728 15	15	01/14/97	10 000	28 875	288	267
					01/16/97	40 000	28 875	1,155	1,027
80	HEXCEL CORP NEW	24 938	1,995 04		10/15/97	25 000	31 250	781	-157
					10/17/97	15 000	30 352	455	-80
					10/23/97	40 000	31 713	1,268	-270
50	IMPERIAL BANCORP	49 313	2,465 65		11/11/97	5 000	45 834	229	17
					11/12/97	15 000	45 360	680	59
					11/13/97	15 000	45 343	680	59
					11/14/97	15 000	45 427	681	58
50	INCYTE PHARMACEUTICALS INC	45 000	2,250 00		11/10/97	5 000	42 135	210	15
					11/12/97	5 000	41 375	206	19
					11/25/97	40 000	40 400	1,616	184
30	INPUT/OUTPUT INC	29 688	890 64		08/22/96	30 000	33 375	1,001	-110
100	INTERSTATE BAKERIES CORP DEL NEW	37 375	3,737 50	28	10/10/96	30 000	19 938	598	523
					10/14/96	20 000	21 375	427	329
					10/14/96	10 000	21 338	213	160
					10/18/96	40 000	22 082	883	612
120	IOMEGA CORP	12 438	1,492 56		11/10/97	120 000	14 251	1,710	-217

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Common stock - continued

Total shares	Description	Price	Current value	Est annual income	Trade date	Shares purchased	Purchase price	Cost basis	Unrealized Gain/loss
112	MEYER FRED INC DELA NEW NEW	36 375	4,074 00		10/10/96	10 000	17 035	170	193
					10/11/96	30 000	17 288	518	573
					10/16/96	30 000	17 387	521	570
					04/08/97	10 000	16 833	168	195
					04/16/97	10 000	17 625	176	187
					04/21/97	22 000	15 965	351	449
50	MGIC INVESTMENT CORP WIS	66 500	3,325 00	5	08/08/97	15 000	51 652	774	223
					08/11/97	5 000	51 000	255	77
					08/12/97	5 000	53 125	265	67
					08/14/97	5 000	52 226	261	71
					08/26/97	20 000	50 875	1,017	313
45	NETWORKS ASSOC INC	52 875	2,379 37		02/14/96	45 000	21 694	976	1 403
50	PATTERSON ENERGY INC	38 688	1,934 40		10/07/97	25 000	61 497	1,537	-569
					10/08/97	25 000	58 642	1,466	-498
80	PEOPLESOFT INC	39 000	3,120 00		09/18/95	80 000	9 750	780	2 340
50	PROMUS HOTEL CORP NEW	42 000	2,100 00		07/11/97	10 000	48 268	482	-62
					07/16/97	40 000	47 812	1,912	-232
80	ROSS STORES INC	36 375	2,910 00	14	03/11/96	80 000	12 750	1,020	1,890
40	SABRATEK CORP	28 750	1,150 00		06/09/97	5 000	31 156	155	-11
					06/10/97	5 000	30 731	153	9
					06/11/97	5 000	31 082	155	11
					06/12/97	15 000	31 098	466	34
					06/13/97	10 000	30 875	308	20
57	SAFEWAY INC	63 250	3,605 25		06/19/96	57 000	26 665	1,519	2,086
80	SCI SYSTEMS INC	43 563	3,485 04		11/07/95	20 000	17 500	350	521
					11/08/95	20 000	16 625	332	589
					01/23/97	40 000	28 187	1,127	615
60	SUNAMERICA INC	42 750	2,565 00	24	04/09/97	45 000	27 739	1 248	675
					04/10/97	15 000	27 676	418	223
60	TELLABS INC	52 875	3,172 50		04/26/96	30 000	28 750	862	724
					05/01/96	30 000	27 625	828	758
110	TEREX CORP DELA NEW	23 500	2,585 00		09/08/97	10 000	23 204	232	3
					09/09/97	10 000	22 863	228	7
					09/10/97	10 000	22 493	224	11

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Common stock - continued

Total shares	Description	Price	Current value	Est annual income	Trade date	Shares purchased	Purchase price	Cost basis	Unrealized Gain/loss
					09/10/97	10 000	22 499	224	11
					09/11/97	20 000	22 060	441	29
					09/12/97	10 000	22 125	221	14
					09/15/97	10 000	22 539	225	10
					09/15/97	10 000	22 625	226	9
					09/16/97	20 000	20 379	407	63
40	TIDEWATER INC	55 375	2,215 00	24	09/18/95	40 000	28 125	1,125	1,090
100	TJX COS INC NEW	34 375	3,437 50	20	12/09/96	50 000	22 250	1,112	606
					12/11/96	10 000	22 250	222	121
					12/13/96	30 000	22 125	663	368
					12/16/96	10 000	22 000	220	123
56	TOTAL RENAL CARE HLDGS INC	27 500	1,540 00		10/08/97	8 000	30 623	245	-25
					10/14/97	8 000	31 477	251	-31
					10/22/97	20 000	32 838	656	-106
					10/23/97	20 000	31 375	627	-77
64	TRAVELERS GROUP INC	53 875	3,448 00	32	09/18/96	64 000	23 620	1,511	1,937
70	U S FILTER CORP NEW NEW	29 938	2,095 66		07/11/96	70 000	21 313	1 491	604
160	VARCO INTL INC	21 438	3,430 08		03/07/97	90 000	13 180	1,186	743
					03/10/97	30 000	13 923	417	296
					03/11/97	40 000	13 876	555	302
50	VLSI TECHNOLOGY INC	23 625	1,181 25		11/11/97	40 000	29 314	1,172	-227
					11/25/97	10 000	22 312	223	13
60	WILLIAMS SONOMA INC	41 875	2,512 50		07/03/97	15 000	40 500	607	21
					07/07/97	45 000	40 061	1,802	82
40	WORLDCOM INC	30 250	1,210 00		08/06/96	40 000	27 219	1,088	122
	Total	$	113,492.10	281				82,535	30,935

Money funds

Description	Opening balance	Closing balance	Closing share price	Average yield	Dividend period	Days in period
ANSOM ST MNY MKT PRTFL	3,674 40	3,699 21	1 00	5 28%	11/21 - 12/21	31
otal	$ 3,674 40	$ 3,699.21				

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Monthly activity

Cash flow

Date	Activity	Description	Amount
11/28		Balance forward	$ 00
12/01	DIVIDEND	DIAMOND OFFSHORE DRILLING INC PAID ON 60	4 20
12/01	DIVIDEND	MGIC INVESTMENT CORP WIS PAID ON 50	1 25
12/05	DIVIDEND	SUNAMERICA INC PAID ON 60	6 00
12/10	DIVIDEND	TIDEWATER INC PAID ON 40	6 00
12/15	DIVIDEND	CNF TRANSPORTATION INC PAID ON 70	7 00
12/15	DIVIDEND	DEAN FOODS CO PAID ON 70	14 00
12/23	DIVIDEND	SANSOM ST MONEY MKT FUND	9 52
		Proceeds from security transactions	$ 1,945.37
		Funds used for security transactions	$ -1,839.16
		Proceeds from money fund transactions	$ 1,839.16
		Funds used for money fund transactions	$ -1,863.97
12/31		Closing balance	$ 129.37

Security transactions

Date	Activity	Description	Quantity	Price / Value	Amount
12/01	BOUGHT	INCYTE PHARMACEUTICALS INC	40 000	40 400700	$ 1,616 03
12/01	BOUGHT	VLSI TECHNOLOGY INC	10 000	22 05/16	223 13
12/04	NAME CHANGE	MCAFEE ASSOC INC * N/C 1997 AS OF 12/03/97	-45 000		
12/04	NAME CHANGE	NETWORKS ASSOC INC AS OF 12/03/97	45 000		
12/05	DIVIDEND	VARCO INTL INC PAID ON 80	80 000		
12/08	DIVIDEND	PEOPLESOFT INC PAID ON 40	40 000		
12/17	DIVIDEND	CISCO SYS INC PAID ON 40	20 000		
12/18	SOLD	GENESIS HEALTH VENTURES INC	-5 000	22 770100	113 84
12/19	SOLD	FRONTIER INSURANCE GROUP INC	-35 000	21 057600	736 99
12/22	SOLD	FRONTIER INSURANCE GROUP INC	-25 000	21 293600	532 32
12/23	EXCHANGE	DOUBLETREE CORP	-50 000		
12/23	DIVIDEND	IOMEGA CORP PAID ON 60	60 000		
12/23	EXCHANGE	PROMUS HOTEL CORP NEW	50 000		

Continued on page 7

Security transactions - continued

Date	Activity	Description	Quantity	Price / Valu		Amount
12/26	SOLD	FRONTIER INSURANCE GROUP INC	-20.000	21 640600	$	432 85
12/31	SOLD	GENESIS HEALTH VENTURES INC	-5 000	25 7/8		129 37
		Securities purchased			$	1,839 16
		Securities sold			$	1,945 37

Money fund transactions

The Sansom Street Money Market Portfolio is your primary sweep fund

Date	Activity	Money fund	Amount
11/28		**Opening Sansom St Money Market Prtfl**	$ 3,674 40
12/01	SOLD	SANSOM MONEY MKT PORTFOLIO	-1,839 16
12/02	BOUGHT	SANSOM MONEY MKT PORTFOLIO	5 45
12/08	BOUGHT	SANSOM MONEY MKT PORTFOLIO	6 00
12/11	BOUGHT	SANSOM MONEY MKT PORTFOLIO	6 00
12/16	BOUGHT	SANSOM MONEY MKT PORTFOLIO	21 00
12/19	BOUGHT	SANSOM MONEY MKT PORTFOLIO	113 84
12/22	BOUGHT	SANSOM MONEY MKT PORTFOLIO	736 99
12/23	BOUGHT	SANSOM MONEY MKT PORTFOLIO	532 32
12/23	BOUGHT	SANSOM MONEY MKT PORTFOLIO	9 52
12/29	BOUGHT	SANSOM MONEY MKT PORTFOLIO	432 85
12/31		**Closing Sansom St Money Market Prtfl**	$ 3,699 21
		Money funds purchased	$ 1,863 97
		Money funds sold	$ -1,839 16

Preliminary 1997 Realized Gains/Losses

Estimated 1997 realized gains/losses for transactions with trade dates through 12/31/97 have been incorporated into this statement. Corrections and adjustments may be made in January which may change the information provided below. Regulated futures held in the account on 12/31/97 must be marked to the market. Mark to market realized entries will appear on your January statement as well as your 1997 Year End Summary mailed in February. This information can be used for tax and investment planning but should not be used for tax filing purposes and may not be a complete listing. The Taxpayer Relief Act of 1997 provides advantageous tax treatment for net capital gains on assets held for and sold during specific time periods. Capital gain rates vary, and are subject to special transition rules for 1997. Consult your tax advisor for details. This is not a tax reporting document. The oldest security lots are liquidated first to calculate gains/losses (first in, first-out or FIFO accounting method) unless you specified which lot to close when you placed your order (a verses purchase or VSP order). An asterisk (*) indicates a manual change in information or a position opened and closed during the current month. Gains/losses may not adjust for all capital changes and are not calculated for zero coupon securities. Cost basis for tax exempt and AMT eligible coupon municipal securities has been adjusted automatically for estimated amortization of bond premiums.

Security description	Method	Quantity/ Face value	Purchase date	Sale date	Sale amount	Purchase amount	Loss	Gain
Short-term gains/losses realized before 5/7/97 held one year or less:								
ACCUSTAFF INC	FIFO	30.000	08/08/96	01/14/97	$ 558 73	$ 915 00	$ -356 27	
BOSTON CHICKEN INC	FIFO	20 000	09/13/96	04/09/97	540 16	707 18	-167 02	
	FIFO	40 000	09/16/96	04/09/97	1,080 31	1,403 66	-323 35	
DIAMOND OFFSHORE DRILLING INC	FIFO	10 000	09/18/96	01/23/97	696 52	561 16		135 36
DSP COMMUNICATIONS INC	FIFO	20.000	08/07/96	03/07/97	216 44	535 64	-319 20	

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Preliminary 1997 Realized Gains/Losses - continued

Security description	Method	Quantity/ Face value	Purchase date	Sale date	Sale amount	Purchase amount	Loss	Gain	Net gain/loss
	FIFO	15.000	08/07/96	03/10/97	$ 178.27	$ 401.73	-223.46		
	FIFO	5.000	08/07/96	03/14/97	52.72	133.91	-81.19		
	FIFO	20.000	08/07/96	04/01/97	194.99	535.64	-340.65		
GALOOB TOYS INC	FIFO	25.000	08/21/96	01/14/97	367.92	640.47	-272.55		
	FIFO	5.000	06/24/96	01/14/97	73.58	130.40	-56.82		
	FIFO	10.000	06/25/96	01/14/97	147.17	269.06	-121.89		
HILTON HOTELS CORP	FIFO	35.000	11/04/96	01/20/97	916.22	1,085.00	-168.78		
	FIFO	35.000	11/05/96	01/20/97	916.22	1,067.50	-151.28		
LEAR CORP	FIFO	5.000	05/29/96	01/09/97	171.94	190.63	-18.69		
	FIFO	45.000	06/03/96	01/09/97	1,547.49	1,740.64	-193.15		
SANTA FE ENERGY RES INC	FIFO	50.000	09/12/96	04/09/97	637.47	670.22	-32.75		
	FIFO	20.000	09/12/96	04/14/97	252.49	268.09	-15.60		
	FIFO	20.000	09/12/96	04/15/97	251.42	268.09	-16.67		
	FIFO	15.000	09/13/96	04/15/97	188.56	199.49	-10.93		
	FIFO	15.000	09/13/96	04/16/97	189.37	199.49	-10.12		
	FIFO	5.000	09/16/96	04/16/97	63.12	66.88	-3.76		
	FIFO	10.000	09/17/96	04/16/97	126.24	132.33	-6.09		
	FIFO	5.000	09/17/96	04/17/97	63.12	66.17	-3.05		
	FIFO	5.000	09/19/96	04/17/97	63.12	66.88	-3.76		
	FIFO	10.000	09/19/96	04/18/97	126.24	133.75	-7.51		
STERIS CORP	FIFO	20.000	09/16/96	02/10/97	529.15	704.25	-175.10		
	FIFO	20.000	09/16/96	02/13/97	489.98	704.25	-214.27		
	FIFO	15.000	09/16/96	02/14/97	385.23	528.19	-142.96		
	FIFO	5.000	09/16/96	02/20/97	124.37	176.06	-51.69		
TOMMY HILFIGER CORP	FIFO	20.000	03/15/96	01/10/97	914.91	929.26	-14.35		
	FIFO	10.000	07/22/96	01/10/97	457.46	483.75	-26.29		
	FIFO	10.000	07/23/96	01/10/97	457.46	498.75	-41.29		
TRAVELERS GROUP INC	FIFO	10.000	09/18/96	04/08/97	493.73	351.56		142.17	
WORLDCOM INC	FIFO	30.000	08/06/96	04/22/97	679.29	816.58	-137.29		
Total					$ 14,151.41	$ 17,581.66	$ -3,707.78	$ 277.53	$ -3,430.25

Preliminary 1997 Realized Gains/Losses - continued

Security description	Method	Quantity/ face value	Purchase date	Sale date	Sale amount	Purchase amount	Loss	Gain	Long-term gain/loss
Long-term gains/losses realized before 5/7/97 held more than one year, or realized after 7/28/97 held more than one year but not more than 18 months:									
ASCEND COMMUNICATIONS INC	FIFO	30 000	05/08/96	08/07/97	$ 1,572 57	$ 1,875 00	$ -302 43		
DURA PHARMACEUTICALS INC	FIFO	20 000	07/16/96	08/19/97	709 98	504 50		205 48	
	FIFO	5 000	07/16/96	08/19/97	177 49	105 05		72 44	
	FIFO	10 000	07/16/96	08/20/97	364 97	210 10		154 87	
	FIFO	25 000	07/16/96	08/26/97	892 95	525 24		367 71	
	FIFO	10 000	07/22/96	08/26/97	357 18	246 67		110 51	
EAGLE HARDWARE & GARDEN INC	FIFO	15 000	07/11/96	10/07/97	289 27	230 63		58 64	
	FIFO	5 000	07/12/96	10/08/97	94 99	83 68		11 31	
	FIFO	10 000	07/12/96	10/09/97	186 40	167 36		19 04	
	FIFO	5 000	07/12/96	10/10/97	89 37	83 68		5 69	
	FIFO	5 000	07/15/96	10/10/97	89 37	87 53		1 84	
	FIFO	20 000	07/15/96	10/13/97	360 23	350 12		10 11	
FIRST USA INC *MERGER 1997	FIFO	40 000	09/18/95	02/10/97	1,924 93	1,002 50		922 43	
GLOBAL MARINE NEW	FIFO	20 000	01/11/96	01/23/97	474 98	175 00		299 98	
MEYER FRED INC DELA NEW NEW	FIFO	50 000	10/10/96	11/21/97	1,549 98	851 78		698 20	
ROSS STORES INC	FIFO	20 000	03/11/96	04/21/97	569 98	255 00		314 98	
SUN MICROSYSTEMS INC	FIFO	10 000	06/11/96	11/10/97	350 45	310 00		40 45	
	FIFO	5 000	06/11/96	11/11/97	168 12	155 00		13 12	
	FIFO	10 000	06/11/96	11/12/97	327 04	310 00		17 04	
	FIFO	15 000	06/11/96	11/13/97	476 23	465 00		11 23	
TIDEWATER INC	FIFO	10 000	09/18/95	04/22/97	462 48	281 25		181 23	
TRANSOCEAN OFFSHORE INC	FIFO	10 000	12/15/95	01/23/97	687 47	407 50		279 97	
	FIFO	20 000	12/15/95	02/10/97	1,123 19	815 00		308 19	
	FIFO	10 000	12/15/95	02/10/97	558 06	407 50		150 56	
Total					$ 13,857 68	$ 9,905 09	$ -302 43	$ 4,255 02	$ 3,952 59
Short-term gains/losses realized after 5/6/97 held one year or less:									
ALTERA CORP	FIFO	25 000	02/10/97	09/08/97	$ 1,344 22	$ 1,095 37		$ 248 85	
	FIFO	5 000	02/10/97	09/09/97	264 99	219 07		45 92	

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Preliminary 1997 Realized Gains/Losses - continued

Security description	Method	Quantity/ Face value	Purchase date	Sale date	Sale amount	Purchase amount	Loss	Gain	Net gain/loss
[redacted]	FIFO	15.000	02/10/97	09/10/97	$ 794.97	$ 657.22		137.75	
[redacted]	FIFO	5.000	02/11/97	09/10/97	264.99	201.88		63.11	
BARRETT RESOURCES CP NEW	FIFO	30.000	01/10/97	05/07/97	1,014.05	1,356.38	-342.33		
	FIFO	10.000	01/14/97	05/08/97	336.81	457.73	-120.92		
	FIFO	5.000	01/14/97	05/09/97	170.14	228.86	-58.72		
	FIFO	5.000	01/14/97	05/13/97	160.71	228.86	-68.15		
CALENERGY INC	FIFO	5.000	05/07/97	08/11/97	182.68	196.68	-14.00		
	FIFO	5.000	05/08/97	08/11/97	182.68	196.25	-13.57		
	FIFO	10.000	05/14/97	08/12/97	369.99	413.98	-43.99		
[redacted]	FIFO	5.000	05/16/97	08/12/97	184.99	202.54	-17.55		
[redacted]	FIFO	5.000	05/16/97	08/14/97	176.87	202.54	-25.67		
[redacted]	FIFO	20.000	05/16/97	08/15/97	710.03	810.14	-100.11		
CUMMINS ENGINE CO	FIFO	10.000	10/06/97	11/10/97	613.33	803.95	-190.62		
	FIFO	20.000	10/07/97	11/10/97	1,226.66	1,627.71	-401.05		
DATA GENERAL CORP	FIFO	20.000	02/10/97	10/27/97	445.30	367.50		77.80	
	FIFO	45.000	02/10/97	11/10/97	884.55	826.88		57.67	
	FIFO	25.000	02/10/97	11/13/97	432.98	459.38	-26.40		
	FIFO	30.000	02/10/97	11/14/97	534.50	551.25	-16.75		
FLORES & RUCKS INC *NAME CHANGE 1997	FIFO	5.000	11/01/96	05/08/97	227.09	238.19	-11.10		
	FIFO	5.000	11/04/96	05/08/97	227.09	241.63	-14.54		
	FIFO	5.000	11/05/96	05/08/97	227.09	244.27	-17.18		
	FIFO	5.000	11/06/96	05/08/97	227.09	245.92	-18.83		
	FIFO	20.000	11/11/96	05/08/97	908.37	989.99	-81.62		
FRONTIER INSURANCE GROUP INC	FIFO	10.000	06/06/97	12/16/97	210.57	296.92	-86.35		
	FIFO	10.000	06/09/97	12/16/97	210.57	295.47	-84.90		
	FIFO	10.000	06/10/97	12/16/97	210.57	300.59	-90.02		
	FIFO	5.000	06/13/97	12/16/97	105.28	151.68	-46.40		
	FIFO	5.000	06/13/97	12/17/97	106.46	151.68	-45.22		
	FIFO	10.000	06/16/97	12/17/97	212.93	311.25	-98.32		
	FIFO	10.000	06/16/97	12/17/97	212.93	309.76	-96.83		
	FIFO	20.000	06/18/97	12/22/97	432.85	640.25	-207.40		
HERMAN MILLER INC	FIFO	10.000	01/10/97	10/06/97	522.83	280.58		242.25	
	FIFO	20.000	01/10/97	10/07/97	1,013.13	561.16		451.97	
STEEL CORP	FIFO	20.000	11/04/96	07/03/97	2,884.90	2,195.00		689.90	

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Preliminary 1997 Realized Gains/Losses - continued

Security description	Method	Quantity/ Face value	Purchase date	Sale date	Sale amount	Purchase amount	Loss	Gain	Symbol
MASTEC INC	FIFO	15 000	01/10/97	11/12/97	364 71	656 25	-291 54		
	FIFO	7 000	01/13/97	11/12/97	170 20	331 58	-161 38		
	FIFO	7 000	01/14/97	11/12/97	170 20	341 88	-171 68		
	FIFO	16 000	01/16/97	11/12/97	389 02	630 21	-241 19		
SEACOR SMIT INC	FIFO	5 000	12/09/96	07/07/97	281 58	318 13	-36 55		
	FIFO	5 000	12/09/96	07/08/97	280 64	318 13	-37 49		
	FIFO	5 000	12/10/96	07/10/97	277 95	319 93	-41 98		
	FIFO	15 000	12/10/96	07/11/97	849 06	959 80	-110 74		
STRATUS COMPUTER INC	FIFO	5 000	08/08/97	11/10/97	167 97	277 20	-109 23		
	FIFO	5 000	08/08/97	11/11/97	161 91	277 20	-115 29		
	FIFO	5 000	08/08/97	11/12/97	159 88	277 20	-117 32		
	FIFO	10 000	08/11/97	11/12/97	319 77	551 79	-232 02		
	FIFO	10 000	08/11/97	11/13/97	318 11	551 79	-233 68		
	FIFO	5 000	08/11/97	11/14/97	158 12	275 90	-117 78		
SUNAMERICA INC	FIFO	10 000	04/08/97	07/11/97	571 23	396 25		174 98	
U S INDUSTRIES INC	FIFO	15 000	02/10/97	09/09/97	568 11	506 84		61 27	
	FIFO	15 000	02/10/97	09/11/97	562 75	506 84		55 91	
	FIFO	20 000	02/10/97	09/12/97	761 90	675 80		86 10	
	FIFO	10 000	02/10/97	09/12/97	380 02	337 90		42 12	
WSTN DIGITAL CORP	FIFO	40.000	11/06/96	10/06/97	1,578 37	1,040 00		538 37	
Total					$ 26,726.69	$ 28,109.13	$ -4,356 41	$ 2,973.97	$ -1,382 44

Long-term gains/losses realized 5/7/97 through 7/28/97 held more than one year, or realized after 7/28/97 held more than 18 months:

BAKER HUGHES INC	FIFO	30 000	03/15/96	10/06/97	$ 1,350 69	$ 877 50		$ 473 19	
BANKBOSTON CORP	FIFO	34 000	09/18/95	07/03/97	2,592 25	1,224 77		1,367 48	
BIOGEN INC	FIFO	20 000	01/10/96	07/03/97	704 28	617 50		86 78	
	FIFO	20 000	06/19/96	07/03/97	704 28	585 00		119 28	
CADENCE DESIGN SYSTEM	FIFO	30 000	11/07/95	09/08/97	1,427 73	717 50		710 23	
	FIFO	30 000	11/08/95	09/09/97	1,484 95	722 50		762 45	
GENESIS HEALTH VENTURES INC	FIFO	5 000	05/23/96	12/15/97	113 84	158 13	-44 29		
	FIFO	5 000	05/23/96	12/26/97	129 37	158 13	-28 76		
OMNICARE INC	FIFO	80.000	09/18/95	09/05/97	2,320 33	1,440 00		880 33	
ORACLE CORP	FIFO	67 000	09/18/95	10/06/97	2,481 59	1,185 00		1,296 59	

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Preliminary 1997 Realized Gains/Losses - continued

Security description	Method	Quantity/ Face value	Purchase date	Sale date	Sale amount	Purchase amount	Loss	Gain	Net gain/loss
PAIRGAIN TECHNOLOGIES INC	FIFO	10 000	05/03/96	06/06/97	175 74	247 50	-71 76		
	FIFO	10 000	05/03/96	06/06/97	177 50	247 50	-70 00		
	FIFO	20 000	05/03/96	06/09/97	359 98	495 00	-135 02		
PAYCHEX INC	FIFO	40 000	09/18/95	10/06/97	1,519 94	795 56		724 38	
	FIFO	5 000	09/18/95	10/07/97	188 39	99 44		88 95	
RAYCHEM CORP	FIFO	20 000	05/03/96	05/08/97	1,347 83	1 525 00	-177 17		
READING & BATES CORP NEW	FIFO	40 000	02/16/96	06/06/97	1,065 66	755 00		310 66	
	FIFO	25 000	02/16/96	06/11/97	649 97	471 88		178 09	
	FIFO	5 000	02/16/96	06/12/97	126 87	94 38		32 49	
REYNOLDS&REYNOLDS A	FIFO	10 000	09/18/95	08/07/97	187 49	180 00		7 49	
	FIFO	70 000	09/18/95	08/08/97	1,305 32	1,260 00		45 32	
USA DETERGENTS INC	FIFO	30 000	04/19/96	05/15/97	341 54	1,115 78	-774 24		
Total					$ 20,755.54	$ 14,973 07	$ -1,301 24	$ 7,083 71	$ 5,782 47
Net capital gains/losses									$ 4,922 37

Year-to-date realized capital gain/loss totals

Short-term gains/losses realized before 5/7/97 held one year or less	$ -3,430 25
Long-term gains/losses realized before 5/7/97 held more than one year, or realized after 7/28/97 held more than one year but not more than 18 months	$ 3 952 59
Short-term gains/losses realized after 5/6/97 held one year or less	$ -1 382 44
Long-term gains/losses realized 5/7/97 through 7/28/97 held more than one year, or realized after 7/28/97 held more than 18 months	$ 5,782 47
Net year-to-date capital gains/losses	$ 4,922 37

December 1997

PAINEWEBBER ACCESS
Individual Retirement Rollover Account

PAINEWEBBER INC
ONE JNDEPENDENT DRIVE
JACKSONVILLE, FL 32202-5081

[redacted]

Net account value on November 28	$	154,207 21
Net account value on December 31	$	155,701 38
Money funds in 12/31 value	$	13,515 30

* Excludes unpriced assets. See back for details

PaineWebber

Retirement Account

Account Number [redacted]
Social Security Number [redacted]

Your Investment Executive

[redacted]

L BUCK FOWLER
4730 PRINCE EDWARD ROAD
JACKSONVILLE FL 32210-8118

Activity summary

Account value on November 28		$ 154,207.21
Cash flow		
Earnings / capital return	+ 248 30	
Proceeds from security transactions	+ 2,144 92	
Funds used for security transactions	-1,936 23	
Security transactions *(Excludes Money fund transactions.)*		
Securities purchased	+ 1,936 23	
Securities sold	-2,144 92	
Change in value of investments	+ 1,245 87	
Account value on December 31		$ 155,701 38

Earnings and capital return summary

Earnings/Capital return categories are for the current calendar year. All prior year entries are summarized separately. This information should not be used for tax purposes. See back for details.

	Current period	Year to date
PaineWebber Money fund dividends	$ 58 00	$ 517 42
Other dividends	190 30	1,916 29
Total earnings / capital return	$ 248 30	$ 2,433 71
Prior year(s) entries and adjustments	00	16 53

Investment objectives

Investment objectives describe the general goals you have for your investments within an account. We understand that the investment objective(s) for this account are the following, in order of priority:

1 Growth 2 Income 3 Investment grade 4 Speculation

If you have any questions concerning these investment objectives, or wish to change the investment objectives for this account, call your Investment Executive or Branch Manager for your branch office.

Account instructions
Your PaineWebber ACCESS account is managed by
OPCAP ADVISORS EQ
PaineWebber is your IRA Rollover custodian

Bulletin Board
IF YOU DO NOT HOLD OUTSIDE ASSETS
1) RETAIN THIS STMT FOR 1997 YEAR-END VALUE.
2) THIS INFO IS BEING FURNISHED TO THE IRS
3) NET ACCT VALUE + ANNUITIES = TOTAL VALUE

Asset summary

See reverse side for information on assets excluded from this summary.

	% of portfolio	Value
Equities	91 31	$ 141,186 08
Money funds	8 69	$ 13,515 30
Total invested assets	100 00	$ 155,701 38
Net account value		$ 155,701 38

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Asset portfolio

When available, prices, income and current values may be approximate and thus gains/losses may not be accurately reflected. Details on back. An asterisk (*) indicates a change in the original transaction data from the prior month or the display of new data input at your branch office. Gains/losses are not calculated for zero coupon investments.

Equities

Common stock

Total shares	Description	Price	Current value	Est annual income	Trade date	Shares purchased	Purchase price	Cost basis	Unrealized Gain/loss
82	AFLAC INC	51.125	4,192.25	38	09/19/95	82.000	27.332	2,241	1,951
140	ARROW ELECTRONICS INC	32.438	4,541.32		09/19/95	140.000	27.125	3,797	744
100	AVON PRODUCTS INC	61.375	6,137.50	126	09/22/95	100.000	36.937	3,693	2,444
65	BANKBOSTON CORP	93.938	6,105.97	133	12/05/96	20.000	64.987	1,299	579
					12/24/96	15.000	66.375	995	414
					04/01/97	10.000	66.750	667	272
					04/04/97	10.000	66.900	669	270
					10/30/97	10.000	82.000	820	119
100	BECTON DICKINSON & CO	50.000	5,000.00	58	09/19/95	100.000	29.187	2,918	2,082
143	BOEING COMPANY	48.938	6,998.13	80	09/19/95	143.000	32.403	4,633	2,365
115	CATERPILLAR INC	48.500	5,577.50	115	01/18/96	50.000	29.974	1,498	927
					05/16/96	30.000	34.312	1,029	426
					06/25/96	20.000	34.562	691	279
					09/12/97	15.000	53.905	808	-80
95	CDN PAC LTD NEW NEW CANADA	27.250	2,588.75	33	12/24/96	35.000	26.500	927	26
						60.000	*This information was unavailable*		
60	CHAMPION INTL CORP	45.313	2,718.78	12	09/19/95	60.000	56.250	3,375	-656
50	CITICORP	126.438	6,321.90	105	09/22/95	50.000	68.750	3,437	2,884
140	EXEL LTD ORD BERMUDA	63.375	8,872.50	224	09/19/95	140.000	28.937	4,051	4,821
275	FEDERAL HOME LN MTGE COM	41.938	11,532.95	110	09/19/95	275.000	17.156	4,717	6,815
205	FREEPORT-MCMORAN COPPER & GOLD INC CL B	15.750	3,228.75	185	09/19/95	205.000	24.875	5,099	-1,870
50	GENL ELECTRIC CO	73.375	3,668.75	60	09/19/95	50.000	30.812	1,540	2,128
75	HARRAHS ENTERTAINEMNT INC	18.875	1,415.62		09/19/95	75.000	31.000	2,325	-909
75	HERCULES INC	50.063	3,754.72	81	09/22/95	60.000	59.500	3,570	-566
					06/25/96	15.000	56.375	845	-94
30	LOCKHEED MARTIN CORP	98.500	2,955.00	48	12/24/96	30.000	89.000	2,670	285

Forward on page 3.

Common stock - continued

Total shares		Description	Price	Current value	Est annual income	Trade date	Shares purchased	Purchase price	Cost basis	Unrealized Gain/loss
	48	LUCASVARITY PLC ADR	34 875	1,674 00	37	04/18/96	34 000	31 607	1,074	111
						06/10/96	14 000	34 820	487	1
	85	MAY DEPT STORES DEL	52 688	4,478 48	102	09/22/95	85 000	39 637	3,369	1,109
	100	MCDONALDS CORP	47 750	4,775 00	33	02/12/97	30 000	45 750	1,372	60
						03/19/97	20 000	47 375	947	8
						07/08/97	15 000	48 983	734	-17
						08/19/97	15 000	49 800	747	-30
						10/17/97	20 000	46 375	927	28
	20	MINNESOTA MNG MFG	82 063	1,641 26	42	12/04/97	20 000	96 811	1,936	-294
	175	MONSANTO COMPANY	42 000	7,350 00	21	11/14/95	175 000	19 844	3,472	3,878
	50	PROGRESSIVE CORP OHIO	119 875	5,993 75	12	09/22/95	50 000	46 875	2,343	3,650
	200	SHAW INDUSTRIES INC	11 625	2,325 00	60	09/19/95	200 000	14 875	2,975	-650
	115	SPRINT CORP	58 625	6,741 87	115	09/19/95	115 000	29 626	3,407	3,334
	180	TENET HEALTHCARE CORP	33 125	5,962 50		09/19/95	180 000	16 625	2,992	2,970
	165	TRAVELERS GROUP INC	53 875	8,889 37	83	09/22/95	165 000	16 791	2,770	6,119
	45	TRITON ENERGY LTD	29 188	1,313 46		08/13/96	45 000	44 250	1,991	-677
	16	WELLS FARGO & CO	339 438	5,431 00	83	09/22/95	16 000	156 055	2,496	2,935
		Total		$ 142,106.08	1,996				92,353	48,191

Money funds

Description	Opening balance	Closing balance	Closing share price	Average yield	Dividend period	Days in period
SANSOM ST MNY MKT PRTFL	13,058 31	13,515 30	1 00	5 28%	11/21 - 12/21	31
Total	$ 13,058.31	$ 13,515.30				

Monthly activity

Cash flow

Date	Activity	Description	Amount
11/28		Balance forward	$ .00
12/01	DIVIDEND	AVON PRODUCTS INC PAID ON 100	31 50
12/01	DIVIDEND	AFLAC INC PAID ON 82	9 43
12/05	DIVIDEND	BOEING COMPANY PAID ON 143	20 02
12/12	DIVIDEND	MCDONALDS CORP PAID ON 100	8 25
12/12	DIVIDEND	MONSANTO COMPANY PAID ON 175	5 25

Continued on page 4

[redacted]

Cash flow - continued

Date	Activity	Description	Amount
12/12	DIVIDEND	SOLUTIA INC	35
		PAID ON 35	
12/15	DIVIDEND	MAY DEPT STORES DEL	25 50
		PAID ON 85	
12/22	DIVIDEND	HERCULES INC	18 75
		PAID ON 75	
12/23	DIVIDEND	SANSOM ST MONEY MKT FUND	58 00
12/29	DIVIDEND	SPRINT CORP	28 75
		PAID ON 115	
12/30	DIVIDEND	FEDERAL HOME LN MTGE COM	27 50
		PAID ON 275	
12/30	DIVIDEND	LOCKHEED MARTIN CORP	12 00
		PAID ON 30	
12/30	DIVIDEND	PROGRESSIVE CORP OHIO	3 00
		PAID ON 50	
		Proceeds from security transactions	$ 2,144.92
		Funds used for security transactions	$ -1,936 23
		Proceeds from money fund transactions	$ 631 28
		Funds used for money fund transactions	$ -1,088 27
12/31		Closing balance	$ .00

Security transactions

Date	Activity	Description	Quantity	Price / Value	Amount
12/09	BOUGHT	MINNESOTA MNG MFG	20 000	96 811700	$ 1,936 23
12/09	SOLD	TELE COMM-TCI VENTURES GRP CL A	-58 000	22 1/2	1,304 95
12/17	SOLD	SOLUTIA INC	-35 000	24	839 97
		Securities purchased			$ 1,936 23
		Securities sold			$ 2,144.92

Money fund transactions

The Sansom Street Money Market Portfolio is your primary sweep fund

Date	Activity	Money fund	Amount
11/28		**Opening Sansom St Money Market Prtfl**	$ 13,058 31
12/02	BOUGHT	SANSOM MONEY MKT PORTFOLIO	40 93
12/08	BOUGHT	SANSOM MONEY MKT PORTFOLIO	20 02
12/09	SOLD	SANSOM MONEY MKT PORTFOLIO	-631 28
12/15	BOUGHT	SANSOM MONEY MKT PORTFOLIO	13 85
12/16	BOUGHT	SANSOM MONEY MKT PORTFOLIO	25 50
12/18	BOUGHT	SANSOM MONEY MKT PORTFOLIO	839 97
12/23	BOUGHT	SANSOM MONEY MKT PORTFOLIO	18 75
12/23	BOUGHT	SANSOM MONEY MKT PORTFOLIO	58 00
12/30	BOUGHT	SANSOM MONEY MKT PORTFOLIO	28 75
12/31	BOUGHT	SANSOM MONEY MKT PORTFOLIO	42 90
12/31		Closing Sansom St Money Market Prtfl	$ 13,515 30
		Money funds purchased	$ 1,088.27
		Money funds sold	$ -631.28

Preliminary 1997 Realized Gains/Losses

Estimated 1997 realized gains/losses for transactions with trade dates through 12/31/97 have been incorporated into this statement. Corrections and adjustments may be made in January which may change the information provided below. Regulated futures held in the account on 12/31/97 must be marked to the market. Mark to market realized entries will appear on your January statement as well as your 1997 Year-End Summary mailed in February. This information can be used for tax and investment planning but should not be used for tax filing purposes and may not be a complete listing. The Taxpayer Relief Act of 1997 provides advantageous tax treatment for net capital gains on assets held for and sold during specific time periods. Capital gain rates vary, and are subject to special transition rules for 1997. Consult your tax advisor for details. This is not a tax reporting document. The oldest security lot is liquidated first to calculate gains/losses (first-in, first-out or FIFO accounting method) unless you specified which lot to close when you placed your order (a verses purchase or VSP order). An asterisk (*) indicates a manual change in information or a position opened and closed during the current month. Gains/losses may not adjust for all capital changes and are not calculated for zero coupon securities. Cost basis for tax exempt and AMT eligible coupon municipal securities has been adjusted automatically for estimated amortization of bond premiums.

Security description	Method	Quantity/ Face value	Purchase date	Sale date	Sale amount	Purchase amount	Loss	Gain	Net gain/loss
Long-term gains/losses realized before 5/7/97 held more than one year, or realized after 7/28/97 held more than one year but not more than 18 months:									
FEDERAL HOME LN MTGE COM	FIFO	25 000	09/19/95	02/21/97	$ 799 97	$ 428 91		$ 371 06	
GENL MOTORS CORP	FIFO	15 000	09/19/95	02/14/97	892 47	710 63		181 84	
	FIFO	30 000	09/19/95	04/25/97	1,660 28	1,421 25		239 03	
TRAVELERS GROUP INC	FIFO	15 000	09/22/95	01/07/97	667 47	377 81		289 66	
	FIFO	15 000	09/22/95	02/11/97	781 85	377 81		404 04	
	FIFO	20 000	09/22/95	02/18/97	1,134 52	503 75		630 77	
Total					$ 5,936 56	$ 3,820 16	$ 2,116 40		$ 2,116 40
Short-term gains/losses realized after 5/6/97 held one year or less:									
TELE COMM-TCI VENTURES GRP CL A	FIFO	58 000	01/10/97	12/04/97	$ 1,304 95	$ 839 59		$ 465 36	
TELE-COMMUNICATIONS INC	FIFO	42 000	01/10/97	09/29/97	844 07	607 98		236 09	
NEW TCI GROUP SER A	FIFO	8 000	01/20/97	09/29/97	160 78	115 51		45 27	
	FIFO	52 000	01/20/97	10/17/97	1,235 97	750 84		485 13	
TENNECO INC (NEW)	FIFO	35 000	12/12/96	08/06/97	1,662 44	1,549 76		112 68	
	FIFO	15 000	01/13/97	08/06/97	712 48	682 35		30 13	
Total					$ 5,920 69	$ 4,546 03	$ 1,374 66		$ 1,374 66
Long-term gains/losses realized 5/7/97 through 7/28/97 held more than one year, or realized after 7/28/97 held more than 18 months:									
ELECTRONIC ARTS	FIFO	55 000	01/09/96	10/06/97	$ 2,148 43	$ 1,429 28		$ 719 15	
PROGRESSIVE CORP OHIO	FIFO	15 000	09/22/95	07/29/97	1,544 59	703 13		841 46	
SOLUTIA INC	FIFO	35 000	11/14/95	12/12/97	839 97	324 69		515 28	
Total					$ 4,532 99	$ 2,457 10	$ 2,075 89		$ 2,075 89
Net capital gains/losses									$ 5,566 95

[redacted]

PaineWebber
Retirement Account

[redacted]

Year-to-date realized capital gain/loss totals

Long-term gains/losses realized before 5/7/97 held more than one year, or realized after 7/28/97 held more than one year but not more than 18 months	$ 2,116.48
Short-term gains/losses realized after 5/6/97 held one year or less	$ 1,374.60
Long-term gains/losses realized 5/7/97 through 7/28/97 held more than one year, or realized after 7/28/97 held more than 18 months	$ 2,075.85
Net year-to-date capital gains/losses	$ 5,566.93

[redacted]

December 1997
Individual Retirement Account

PAINEWEBBER INC
ONE INDEPENDENT DRIVE
JACKSONVILLE, FL 32202-5081

[redacted]

Net account value on November 28	$	8,829.38
Net account value on December 31	$	8,868.71
Money funds in 12/31 value	$	2,065.62

* Excludes unpriced assets - See back for details

PaineWebber
Retirement Accounts

Account Number [redacted]
Social Security Number [redacted]

Your Investment Executive
[redacted]

L BUCK FOWLER
4730 PRINCE EDWARD ROAD
JACKSONVILLE FL 32210-8118

[redacted]

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Contribution summary

We have categorized deductible and non-deductible contributions based on information you have provided. To ensure accuracy, please provide the most current information.

	Current period	Tax year 1997	Tax year 1996
Deductible contributions	00	2,000.00	2,000.00

Earnings and capital return summary

Earnings/capital return categories are for the current calendar year. All prior year entries are summarized separately. This information should not be used for tax purposes. See back for details.

	Current period	Year to date
PaineWebber Money fund dividends	$ 7.83	$ 69.49
Other dividends	38.28	444.75
Total earnings / capital return	$ 46.11	$ 514.24
Prior year(s) entries and adjustments	00	8.40

Asset summary

See reverse side for information on assets excluded from this summary.

	% of portfolio	Value
Money funds	23.29	2,065.62
Mutual funds	76.71	6,803.09
Total invested assets	100.00	$ 8,868.71
Net account value		$ 8,868.71

Investment objectives

Investment objectives describe the general goals you have for your investments within an account. We understand that the investment objective(s) for this account are the following, in order of priority:

1 Growth 2 Investment grade 3 Income 4 Speculation

If you have any questions concerning these investment objectives, or wish to change the investment objectives for this account, call your Investment Executive or Branch Manager for your branch office.

Account instructions
PaineWebber is your IRA custodian

Bulletin Board
IF YOU DO NOT HOLD OUTSIDE ASSETS
1) RETAIN THIS STMT FOR 1997 YEAR-END VALUE.
2) THIS INFO IS BEING FURNISHED TO THE IRS.
3) NET ACCT VALUE + ANNUITIES = TOTAL VALUE
RETIREMENT MONEY FUND UNDER $25?
SEE SPECIAL INFORMATION ON REVERSE SIDE

PaineWebber
Retirement Account

Asset portfolio

Prices, income and current values may be approximate. Details on back

Quantity/face value	Description	Price	Current value	Est. income
682.357	VAN KAMPEN AMER CAPITAL PRIME RATE INCOME TRUST	9.970	6,803.09	478
2,065.620	PW RETIREMENT MONEY FUND	1.000	2,065.62	
	Opening balance $ 2,057.79 Avg yield 4.96% Int period 11/20 - 12/17			
	Total		$ 8,868.71	$ 478

Activity

Date	Activity	Description	Quantity	Price / Value / Comment	Amount
11/28		Balance forward		$	.00
12/19	BOUGHT	PW RETIREMENT MONEY FUND	7.830	1	-7.83
12/19	DIVIDEND	PW RETIREMENT MONEY FUND			7.83
12/29	DIVIDEND	VAN KAMPEN AMER CAPITAL PRIME RATE INCOME TRUST AS OF 12/24/97			38.28
12/29	REINVESTMENT	VAN KAMPEN AMER CAPITAL PRIME RATE INCOME TRUST DIVIDEND REINVESTED AT 9.97 NAV ON 12/24/97 AS OF 12/24/97	3.840		-38.28
12/31		Closing balance		$	.00

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[redacted]

December 1997

PAINEWEBBER INC
ONE INDEPENDENT DRIVE
JACKSONVILLE, FL 32202-5081

[redacted]

Net account value on November 28	$	205,602.88
Net account value on December 31	$	106,301.74
Cash in 12/31 value	$	106,301.74
Other items not in net account value on 12/31		
Insurance product values (est.)	$	503,283.75
Net account value plus above	$	609,585.49 *

* Excludes unpriced assets. See back for details

PaineWebber
Resource Management Account

Account Number [redacted]

Your Investment Executive

[redacted]

L BUCK FOWLER
SPECIAL ACCT #1
4730 PRINCE EDWARD ROAD
JACKSONVILLE FL 32210-8118

Activity summary

Account value on November 28		$ 205,602.88
Cash flow		
Earnings / capital return	+ 698.86	
Funds used for security transactions	-100,000.00	
Security transactions *(Excludes Money fund transactions.)*		
Securities purchased	+ 100,000.00	
Securities transferred out or delivered	-100,000.00	
Account value on December 31		$ 106,301.74

Earnings and capital return summary

Earnings below are classified as taxable or non-taxable based on the tax status for the specific security on which the earnings are received and does not attempt to reflect your account's specific tax status or reporting requirements. Use only official tax reporting documents (e.g. 1099) for tax reporting purposes. The classification of Direct/Private investment distributions can only be determined by referring to the official year-end tax reporting document provided by the issuer.

	Current period	Year to date
Taxable		
PaineWebber Money fund dividends	$ 698.86	$ 6,388.98
Total taxable earnings/capital return	$ 698.86	$ 6,388.98

Investment objectives

Investment objectives describe the general goals you have for your investments within an account. We understand that the investment objective(s) for this account are the following, in order of priority:

1 Growth 2 Income 3 Investment grade 4 Speculation

If you have any questions concerning these investment objectives, or wish to change the investment objectives for this account, call your Investment Executive or Branch Manager for your branch office.

Bulletin Board
PRELIMINARY 1997 REALIZED GAINS/LOSSES ARE INCLUDED IN THIS STATEMENT TO HELP YOU START PLANNING FOR YOUR 1997 TAXES. THE YEAR-END SUMMARY WILL BE MAILED TO YOU IN FEBRUARY.
RESOURCELINE 1-800-RMA-1000 ACCOUNT # 315025920
FOR AN RMA REPRESENTATIVE CALL 1-800-RMA-1000

Credit summary

Year-to-date late payment interest	$ 87.24

B-1

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PaineWebber
Resource Management Account

Asset portfolio

When available prices, income and current values may be approximate and thus gains/losses may not be accurately reflected. Details on back. An asterisk (*) indicates a change in the original transaction data from the prior month or the display of new data input at your branch office. Gains/losses are not calculated for zero coupon investments.

Insurance products

Annuity contracts, life insurance and long term health care products listed below are not held in your account at PaineWebber and therefore are not included in your total net account value.

Annuities

Amount	Description	Contract/policy no	Current value	Rate	Issue date
100,000	NATIONAL INTEGRITY LIFE	9730002254	104,925.00	Variable	05/23/97
	AS OF 12/15/97				
	GRO10100%TUM 10YR				
375,000	NATL INTEGRITY PINNACLE2	9730001043	398,358.75	Variable	01/23/97
	AS OF 12/15/97				
	GRO10100%				
475,000	Total		$ 503,283.75		

Money funds

Description	Opening balance	Closing balance	Closing share price	Average yield	Dividend period	Days in period
RMA MONEY MKT PORTFOLIO	205,602.88	.00	1.00	5.15%	11/20 - 12/17	28
Total	$ 205,602.88	$ .00				

Monthly activity

Cash flow

Date	Activity	Description	Amount
11/28		Balance forward	$ .00
12/19	DIVIDEND	RMA MONEY MKT PORTFOLIO	698.86
		Funds used for security transactions	$ -100,000.00
		Proceeds from money fund transactions	$ 206,301.74
		Funds used for money fund transactions	$ -698.86
12/31		Closing balance	$ 106,301.74

Security transactions

Date	Activity	Description	Quantity	Price / Value	Amount
12/10	DELIVER	KEYPORT LIFE KETSELECT INDEX 5YR	-100,000.000	100,000.00	

PaineWebber
Resource Management Account

[redacted]

Security transactions - continued

Date	Activity	Description	Quantity	Price / Value	Amount
12/10	BOUGHT	KEYPORT LIFE KETSELECT INDEX 5YR	100,000 000	1 000000	$ 100,000 00
		Securities purchased			$ 100,000 00
		Securities transferred out or delivered		$ -100,000.00	$ 00

Money fund transactions

The RMA Money Mkt. Portfolio is your primary sweep fund.

Date	Activity	Money fund	Amount
11/28		Opening RMA Money Mkt. Portfolio	$ 205,602 88
12/10	SOLD	RMA MONEY MKT PORTFOLIO	-100,000 00
12/19	BOUGHT	RMA MONEY MKT. PORTFOLIO	698 86
12/31	SOLD	RMA MONEY MKT. PORTFOLIO	-106,301 74

Date	Activity	Money fund	Amount
12/31		Closing RMA Money Mkt. Portfolio	$ 00
		Money funds purchased	$ 698.86
		Money funds sold	$ -206,301 74

1274

B-3

December 1997

PaineWebber

Investment Account

PAINEWEBBER INC
ONE INDEPENDENT DRIVE
JACKSONVILLE, FL 32202-5081

[redacted]

Net account value on November 28	$	6,611.24
Net account value on December 31	$	6,637.46
Money funds in 12/31 value	$	6,637.46
Other items not in net account value on 12/31		
Insurance product values (est.)	$	108,009.68
Net account value plus above	$	114,647.14 *

* Excludes unpriced assets. See back for details

Account Number [redacted]

Your Investment Executive

[redacted]

L BUCK FOWLER
4730 PRINCE EDWARD ROAD
JACKSONVILLE FL 32210-8118

Earnings and capital return summary

Earnings below are classified as taxable or non-taxable based on the tax status for the specific security on which the earnings are received and does not attempt to reflect your account's specific tax status or reporting requirements. Use only official tax reporting documents (e.g. 1099) for tax reporting purposes. The classification of Direct/Private investment distributions can only be determined by referring to the official year-end tax reporting document provided by the issuer.

	Current period	Year to date
Taxable		
PaineWebber Money fund dividends	$ 26.22	$ 342.43
Total taxable earnings/capital return	$ 26.22	$ 342.43
Prior year(s) adjustments	.00	8.85

Asset summary

See reverse side for information on assets excluded from this summary.

	% of portfolio	Value
Money funds	100.00	6,637.46
Net account value		$ 6,637.46

Investment objectives

Investment objectives describe the general goals you have for your investments within an account. We understand that the investment objective(s) for this account are the following, in order of priority:

1 Growth 2 Investment grade 3 Income 4 Speculation

If you have any questions concerning these investment objectives, or wish to change the investment objectives for this account, call your Investment Executive or Branch Manager for your branch office.

Bulletin Board

AS 1998 BEGINS, WE WANT TO THANK YOU FOR YOUR VALUED RELATIONSHIP AND REAFFIRM OUR COMMITMENT TO PROVIDING ADVICE AND SOLUTIONS TO HELP ACHIEVE YOUR FINANCIAL GOALS.

1275

[redacted]

PaineWebber
Investment Account

Asset portfolio

Prices, income and current values may be approximate Details on back

Quantity/face value	Description	Price	Current value	Est. income
6,637.460	CASHFUND	1.000	6,637.46	
	Opening balance $ 6,611.24 Avg yield 5.17% Int period 11/25 - 12/22			
100,000	NATIONAL INTEGRITY LIFE AS OF 12/15/97	Excluded from acct value	108,009.68	
	GRO10100%1UM 10YR			
	Contract/policy # 9610001318 Rate Variable Purchased 12/12/96			
	Total		$ 6,637.46	

Activity

Date	Activity	Description	Quantity	Price / Value / Comment	Amount
11/28		**Balance forward**			$ .00
12/24	DIVIDEND	PAINE WEBBER CASHFUND			26.22
12/24	BOUGHT	PAINE WEBBER CASHFUND	26.220	1	-26.22
12/31		**Closing balance**			$ .00

B-5

1276

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1997

FORM A
For use by Members, officers, and employees

RECEIVED
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CLERK OF THE HOUSE
OF REPRESENTATIVES

(4)

JON D. FOX
(Full Name)

312 GLEN LANE
(Mailing Address)

ELKINS PARK, PA 19027

Daytime Telephone: (202) 225-6111

MC (Office Use Only)

Filer Status: [X] Member of the U.S. House of Representatives — State PA District 13 — [ ] Officer or Employee — Employing Office

Report Type: [X] Annual (May 15) — [ ] Amendment — [ ] Termination — Termination Date

A *$200 penalty* shall be assessed against anyone who files more than 30 days late.

PRELIMINARY INFORMATION — ANSWER EACH OF THESE QUESTIONS

I. Did you or your spouse have "earned" income (e.g., salaries or fees) of $200 or more from any source in the reporting period? **If yes, complete and attach Schedule I.** — Yes [ ] No [X]

II. Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? **If yes, complete and attach Schedule II.** — Yes [ ] No [X]

III. Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? **If yes, complete and attach Schedule III.** — Yes [X] No [ ]

IV. Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset worth more than $1,000 in the reporting period? **If yes, complete and attach Schedule IV.** — Yes [ ] No [X]

V. Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? **If yes, complete and attach Schedule V.** — Yes [X] No [ ]

VI. Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $250 and not otherwise exempt)? **If yes, complete and attach Schedule VI.** — Yes [ ] No [X]

VII. Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $250 from one source)? **If yes, complete and attach Schedule VII.** — Yes [ ] No [ ]

VIII. Did you hold any reportable positions on or before the date of filing in the current calendar year? **If yes, complete and attach Schedule VIII.** — Yes [ ] No [X]

IX. Did you have any reportable agreement or arrangement with an outside entity? **If yes, complete and attach Schedule IX.** — Yes [ ] No [X]

Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION — ANSWER EACH OF THESE QUESTIONS

TRUSTS—Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child? — Yes [ ] No [X]

EXEMPTION—Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption? — Yes [ ] No [X]

CERTIFICATION — THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended. The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct or its designee. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil penalties and criminal sanctions (*See* 5 U.S.C. app. 4, §104 and 18 U.S.C. §1001)

SIGNATURE OF REPORTING INDIVIDUAL — JON D. FOX — DATE (Month/Day/Year): MAY 12, 1998

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Name JON D. FOX	Page 1 of 8

SCHEDULE I — EARNED INCOME

List the source, type, and amount of earned income from any source (other than the filer's current employment by the U.S. Government) totalling $200 or more during the preceding calendar year. For a spouse, list the source and amount of any honoraria, list only the source for other spouse earned income exceeding $1,000

	Source	Type	Amount
Examples	Keene State	Approved Teaching Fee	$6,000
	State of Maryland	Legislative Pension	$9,000
	Civil War Roundtable (Oct 2nd)	Spouse Speech	$1,000
	Ontario County Board of Education	Spouse Salary	NA
	NOT APPLICABLE		

For payments to charity in lieu of honoraria, use Schedule II.

SCHEDULE II — PAYMENTS IN LIEU OF HONORARIA MADE TO CHARITY

List the source, activity (i.e., speech, appearance, or article), date, and amount of any payment made by the sponsor of an event to a charitable organization in lieu of an honorarium. A separate confidential list of charities receiving such payments must be filed directly with the Committee on Standards of Official Conduct. An envelope for transmitting the list is included in each Member's filing package.

Source	Activity	Date	Amount
Examples Association of American Associations, Wash., D.C XYZ Magazine	Speech Article	Feb. 2, 1997 Aug. 13, 1997	$2,000 $500
NOT APPLICABLE			

This page may be copied if more space is required.

Name JON D. FOX | Page 3 of 8

SCHEDULE III — ASSETS AND "UNEARNED" INCOME

BLOCK A — Asset and/or Income Source

Identify (a) each asset held for investment or production of income with a fair market value exceeding $1,000 at the end of the reporting year, and (b) any other asset or source of income which generated more than $200 in "unearned" income during the year. For rental property or land, provide an address. Provide full names of any mutual funds. For an IRA or retirement plan that is *self-directed*, list the underlying assets worth more than $1,000. For an IRA or retirement plan that is not self-directed, name the institution holding the account.

Exclude: Your personal residence(s) (unless there is rental income), any debt owed to you by your spouse, or by your or your spouse's child, parent, or sibling; any deposits totalling $5,000 or less in personal savings accounts; any financial interests in or income derived from U.S. Government retirement programs.

If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC) or is jointly held (JT), in the optional column on the far left.

BLOCK B — Value of Asset

at close of reporting year

If you use a valuation method other than fair market value, please specify the method used. If an asset was sold and is included only because it generated income, the value should be "None."

BLOCK C — Type of Income

BLOCK D — Amount of Income

For IRA's and retirement plans that are *not* self-directed, you may write in "NA" for income.

BLOCK E — Transaction

Indicate if asset was purchased (P), sold (S), or exchanged (E) in reporting year.

	BLOCK A	B	B	B	B	B	B	B	B	B	B	B	C	C	C	C	C	C	C	D	D	D	D	D	D	D	D	D	D	E
		A	B	C	D	E	F	G	H	I	J	K	L	M	N	O	P	Q	R	I	II	III	IV	V	VI	VII	VIII	IX	X	XI	
		None	$1 – $1,000	$1,001 – $15,000	$15,001 – $50,000	$50,001 – $100,000	$100,001 – $250,000	$250,001 – $500,000	$500,001 – $1,000,000	$1,000,001 – $5,000,000	$5,000,001 – $25,000,000	$25,000,001 – $50,000,000	Over $50,000,000	DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other: Type of Income (Specify. For Example: Partnership Income or Farm Income)	None	$1 – $200	$201 – $1,000	$1,001 – $2,500	$2,501 – $5,000	$5,001 – $15,000	$15,001 – $50,000	$50,001 – $100,000	$100,001 – $1,000,000	$1,000,001 – $5,000,000	Over $5,000,000	
SP DC JT	*Examples* Mega Corp. Stock Simon & Schuster 1st Bank of Paducah, KY accounts		Indefinite			X	X							X						Royalties				X				X			P
	Prudential IRA		X													X															
	Prudential Insurance			X												X						X									
	Fidelity Magellan Fund..			X												X						X									
	Eastman Kodak		X																		X										

For additional assets and unearned income, use next page.

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SCHEDULE III — ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Name JON D. FOX

SP DC JT	BLOCK A Asset and/or Income Source	BLOCK B Year-End Value of Asset											BLOCK C Type of Income							BLOCK D Amount of Income										BLOCK E Transaction
		A None	B $1 – $1,000	C $1,001 – $15,000	D $15,001 – $50,000	E $50,001 – $100,000	F $100,001 – $250,000	G $250,001 – $500,000	H $500,001 – $1,000,000	I $1,000,001 – $5,000,000	J $5,000,001 – $25,000,000	K $25,000,001 – $50,000,000	L Over $50,000,000	DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Type of Income (Specify)	I None	II $1 – $200	III $201 – $1,000	IV $1,001 – $2,500	V $2,501 – $5,000	VI $5,001 – $15,000	VII $15,001 – $50,000	VIII $50,001 – $100,000	IX $100,001 – $1,000,000	X $1,000,001 – $5,000,000	XI Over $5,000,000	P, S, E
	NOT APPLICABLE																												

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SCHEDULE IV — TRANSACTIONS

Name	Page
JON D. FOX	5 of 8

Report any purchase, sale, or exchange by you, your spouse, or dependent child during the reporting year of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child, or the purchase or sale of your personal residence, unless it is rented out

SP, DC, JT	Asset	Type of Transaction: PURCHASE	SALE	EXCHANGE	Date (MO/DAY/YR)	Amount of Transaction: B ($1,001–$15,000)	C ($15,001–$50,000)	D ($50,001–$100,000)	E ($100,001–$250,000)	F ($250,001–$500,000)	G ($500,001–$1,000,000)	H ($1,000,001–$5,000,000)	I ($5,000,001–$25,000,000)	J ($25,000,001–$50,000,000)	K (Over $50,000,000)
SP	*Example* Mega Corporation Common Stock	X			10-12-97		X								
	NOT APPLICABLE														

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SCHEDULE V — LIABILITIES

Report liabilities of over $10,000 owed to any one creditor ***at any time*** during the reporting period by you, your spouse, or dependent child. Mark the highest amount owed during the year. **Exclude:** Any mortgage on your personal residence (unless it is rented out), loans secured by automobiles, household furniture, or appliances, and liabilities owed to a spouse, or the child, parent, or sibling of you or your spouse. Report ***revolving charge accounts*** only if the balance at the end of the reporting period exceeded $10,000.

SP, DC, JT	Creditor	Type of Liability	Amount of Liability										
			B $10,001 – $15,000	C $15,001 – $50,000	D $50,001 – $100,000	E $100,001 – $250,000	F $250,001 – $500,000	G $500,001 – $1,000,000	H $1,000,001 – $5,000,000	I $5,000,001 – $25,000,000	J $25,000,001 – $50,000,000	K Over $50,000,000
	Example First Bank of Wilmington, Delaware	Mortgage on 123 Main St., Dover, Del				X						
	Bruce Toll 1477 Rydal Road, Rydal, PA 19046	Personal Loan		X								
	Congressional FCU	Visa	X									

SCHEDULE VI — GIFTS

Report the source, a brief description, and the value of all gifts totalling more than $250 received by you, your spouse, or a dependent child from any source during the year.

Exclude: Gifts from relatives, gifts of personal hospitality of an individual, local meals, and gifts to a spouse or dependent child that are totally independent of his or her relationship to you. Gifts with a value of $100 or less need not be added towards the $250 disclosure threshold.

Note: The gift rule (House Rule 51) prohibits gifts except as specifically provided in the rule.

Source	Description	Value
Example Mr. Joseph H. Smith, Anytown, Anystate	Silver Platter (determination on personal friendship) received from Committee on Standards	$270
	** NONE KNOWN **	

Use additional sheets if more space is required.

Name	JON D. FOX	Page 7 of 8

SCHEDULE VII —TRAVEL PAYMENTS AND REIMBURSEMENTS

Identify the source and list travel itinerary, dates, and nature of expenses provided for travel and travel-related expenses totalling more than $250 received by you, your spouse, or a dependent child during the reporting period. Indicate whether a family member accompanied the traveler at the sponsor's expense, and the amount of time, if any, that was not at the sponsor's expense. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor.

Exclude: Travel-related expenses provided by federal, state, and local governments, or by a foreign government required to be separately reported under the Foreign Gifts and Decorations Act (5 U.S.C. § 7342), travel paid for by a Federal political committee; travel provided to a spouse or dependent child that is totally independent of his or her relationship to you.

	Source	Date(s)	Point of Departure—Destination—Point of Return	Lodging? (Y/N)	Food? (Y/N)	Was a Family Member Included? (Y/N)	Any time not at sponsor's expense
Examples	Chicago Chamber of Commerce	Mar 2	Wash., D.C.—Chicago—Wash., D.C.	N	N	N	N
	Roycroft Corporation	Aug 6–13	Wash., D.C.—Los Angeles—Cleveland	Y	Y	Y	4 Days
	ASPEN INSTITUTE BI PARTISAN CONGRESSIONAL RETREAT	MAR 7-9	TRAVEL - SELF PAID ABINGTON, PA - HERSHEY, PA - ABINGTON, PA MEALS AND LODGING PAID BY ASPEN INSTITUTE	Y	Y	Y	N

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Name JON D. FOX	Page 0 of 0

SCHEDULE VIII — POSITIONS

Report all positions, compensated or uncompensated, held during the current calendar year as an officer, director, trustee of an organization, partner, proprietor, representative, employee, or consultant of any corporation, firm, partnership, or other business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States.

Exclude: Positions held in any religious, social, fraternal, or political entities; positions solely of an honorary nature; and positions listed on Schedule I.

Position	Name of Organization
	NONE KNOWN

SCHEDULE IX — AGREEMENTS

Identify the date, parties to, and general terms of any agreement or arrangement with respect to future employment; a leave of absence during the period of government service; continuation or deferral of payments by a former or current employer other than the U.S. Government; or continuing participation in an employee welfare or benefit plan maintained by a former employer.

Date	Parties To	Terms of Agreement
	NONE KNOWN	

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Use additional sheets if more space is required.

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UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1997

Form A
For use by Members officers and employees

Barney Frank
(Full Name)

2210 Rayburn Building
(Mailing Address)

Washington DC 20515

Daytime Telephone (202) 225-5931

HL (Office Use Only) (1)

Filer Status [X] Member of the U S House of Representatives — State MA District 04 — [ ] Officer or Employee — Employing Office

Report Type [X] Annual (May 15) — [ ] Amendment — [ ] Termination — Termination Date

A $200 penalty shall be assessed against anyone who files more than 30 days late.

PRELIMINARY INFORMATION -- ANSWER EACH OF THESE QUESTIONS

I Did you or your spouse have "earned" income (e g , salaries or fees) of $200 or more from any source in the reporting period? **If yes, complete and attach Schedule I.** Yes [ ] No [X]

II Did any individual or organization make a donation to charity in lieu of paying you for a speech, apppearance, or article in the reporting period? **If yes, complete and attach Schedule II.** Yes [ ] No [X]

III Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? **If yes, complete and attach Schedule III.** Yes [X] No [ ]

IV Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset worth more than $1,000 in the reporting period? **If yes, complete and attach Schedule IV.** Yes [X] No [ ]

V Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? **If yes, complete and attach Schedule V.** Yes [X] No [ ]

VI Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i e , aggregating more than $250 and not otherwise exempt)? **If yes, complete and attach Schedule VI.** Yes [ ] No [X]

VII Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $250 from one source)? **If yes, complete and attach Schedule VII.** Yes [X] No [ ]

VIII Did you hold any reportable positions on or before the date of filing in the current calendar year? **If yes, complete and attach Schedule VIII.** Yes [ ] No [X]

IX Did you have any reportable agreement or arrangement with an outside entity? If yes, complete and attach Schedule IX. Yes [ ] No [X]

Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION -- ANSWER EACH OF THESE QUESTIONS

TRUSTS- Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child? (See Instructions, pages 10-11) Yes [ ] No [X]

EXEMPTION Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption? (See Instructions, page 11) Yes [ ] No [X]

CERTIFICATION -- THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended. The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct or its designee. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil penalties and criminal sanctions (See 5 U S C. app. 4, 104 and 18 U S C 1001)

SIGNATURE OF REPORTING INDIVIDUAL Barney Frank

DATE (Month/Day/Year) May 14, 1998

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SCHEDULE III -- ASSETS AND "UNEARNED" INCOME

BLOCK A **Asset and/or Income Source** Identify (a) each asset held for investment or production of income with a fair market value exceeding $1,000 at the end of the reporting year, and (b) any other asset or source of income which generated more than $200 in "unearned" income during the year. For rental property or land, provide an address. Provide full names of any mutual funds. For an IRA or retirement plan that is *self-directed*, list the underlying assets worth more than $1,000. For an IRA or retirement plan that is *not* self-directed, name the institution holding the account. **Exclude:** Your personal residence(s) (unless there is rental income); any debt owed to you by your spouse, or by your or your spouse's child, parent, or sibling; any deposits totalling $5,000 or less in personal savings accounts; any financial interests in or income derived from U.S. Government retirement programs. If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC) or is jointly held (JT), in the optional column on the far left For further information, see Instructions, pages 14-20	BLOCK B **Value of Asset** at close of reporting year If you use a valuation method other than fair market value, please specify the method used If an asset was sold and is included only because it generated income, the value should be "None."	BLOCK C **Type of Income** If other than one of the listed categories, specify the type of income by writing a brief description in this block.	BLOCK D **Amount of Income** For IRA's and retirement plans that are *not* self-directed, you may write in "NA" for income.	BLOCK E **Transaction** Indicate if asset was purchased(P), sold(S), or exchanged(E) in reporting year.
SP DC *Examples.* SP JT	Mega Corp Stock 123 Main St , Dover, Del. 1st Bank of Paducah, KY accounts	$15,001 - $50,000 $250,001 - $500,000 $50,001 - $100,000	Dividends Rent Interest	$201 - $1,000 $1,001 - $2,500 $5,001 - $15,000	P
TIAA-CREF Retirement Account		$15,001 - $50,000 ($23,082)	NONE	None	NA
1919 S street N.W. Washington, DC Personal Residence; 1/2 interest		$100,001 - $250,000 ($238,500)	NONE	None	NA
McGraw-Hill Publishing Co. Hightstown, NJ		Indefinite	Royalties	$1 - $200 ($9.80)	NA
Fidelity Investments (Boston) IRA (Mutual Funds)		$15,001 - $50,000 ($24,813)	NONE	None	NA
City of Taunton, MA Municipal Bonds		$15,001 - $50,000 ($16,600)	Interest	$201 - $1,000 ($954)	NA

SCHEDULE III -- ASSETS AND "UNEARNED" INCOME

	Town of Leicester, MA Municipal Bonds	$15,001 - $50,000 ($15,400)	Interest	$201 - $1,000 ($881)	NA
	University of Massachusetts Building Authority Bonds	$1,001 - $15,000 ($10,700)	Interest	$201 - $1,000 ($612)	NA
	Fidelity Investments (Boston, MA) tax-free money market account	$1,001 - $15,000 ($6,000)	Interest	$1 - $200 ($150)	NA
	AIM Stock IRA (Boston, MA)	$15,001 - $50,000 ($24,207)	NONE	None	NA
	US Trust - Boston, MA Savings Account	$1,001 - $15,000 ($13,000)	NONE	$201 - $1,000 ($350)	NA
	4% Interest in Breadline Restaurant (Washington, DC) April 97	$15,001 - $50,000 ($25,000)	NONE	None	NA
	City of Springfield, MA Municipal Bonds	$15,001 - $50,000 ($20,000)	Interest	$201 - $1,000 ($300)	S

SCHEDULE IV -- TRANSACTIONS

Report any purchase, sale, or exchange by you, your spouse, or dependent child during the reporting year of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child, or the purchase or sale of your personal residence, unless it is rented out. For further information, see Instructions, pages 20-21.

SP,DC,JT	Asset	Type of Transaction	Date	Amount of Transaction
	Example: Mega Corporation Common Stock	Purchase	10/12/94	$15,001 - $50,000
	City of Springfield Municipal Bonds	Sold	April, 97	$15,001 - $50,000 ($20,000)

SCHEDULE V -- LIABILITIES

Report liabilities of over $10,000 owed to any one creditor ***at any time*** during the reporting period by you, your spouse, or dependent child. Mark the highest amount owed during the year.
Exclude: Any mortgage on your personal residence (unless it is rented out), loans secured by automobiles, household furniture, or appliances, and liabilities owed to a spouse, or the child, parent, or sibling of you or your spouse. Report ***revolving charge accounts*** only if the balance at the end of the reporting period exceeded $10,000. For further information, see Instructions, pages 21-22.

SP,DC,JT	Creditor	Type of Liability	Amount of Liability
	Example: First Bank of Wilmington, Delaware	Mortgage on 123 Main St., Dover, Del	$100,001 - $250,000
	First Union Mortgage Co. (Raleigh, NC)	Mortgage on 1919 S Street, N.W. Washington, DC (personal residence; 1/2 interest)	$100,001 - $250,000 ($183,000)

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SCHEDULE VII -- TRAVEL PAYMENTS AND REIMBURSEMENTS

Identify the source and list travel itinerary, dates, and nature of expenses provided for travel and travel-related expenses totalling more than $250 received by you, your spouse, or a dependent child during the reporting period. Indicate whether a family member accompanied the traveler at the sponsor's expense, and the amount of time, if any, that was not at the sponsor's expense. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor.
Exclude: Travel-related expenses provided by federal, state and local governments, or by a foreign government required to be separately reported under the Foreign Gifts and Decorations Act (5 U.S.C. 7342); travel paid for by a Federal political committee, travel provided to a spouse or dependent child that is totally independent of his or her relationship to you. For further information, see Instructions, pages 24-26.

Source	Date(s)	Point of Departure--Destination--Point of Return	Lodging? (Y/N)	Food? (Y/N)	Was a Family Member Included? (Y/N)	Any time not at sponsor's expense
Examples Chicago Chamber of Commerce	Mar 2	Wash , D C -Chicago-Wash , D C	N	N	N	N
Mega Corporation	Aug 6-13	Wash , D C -Los Angeles-Cleveland	Y	Y	Y	4 Days
Aspen, CO Human Rights Summit II [Speech]	1/27 - 1/29	Washington, DC - Aspen - Boston	Y	Y	N	NONE
Oberlin College [Speeches]	2/7 - 2/8	Washington, DC - Oberlin, OH - Washington, DC	Y	Y	N	NONE
Hands Off Washington (Seattle) [Speech]	3/16 - 3/17	Washington, DC - Seattle, WA - Washington, DC	Y	Y	N	NONE
Heritage of Pride, Inc (New York) [Parade, Speech]	6/27 - 6/29	Boston, MA - New York, NY - Washington, DC	Y	Y	N	NONE
Brian Hughes for Freeholder Committee Princeton, NJ [Political Speech]	7/19	Boston - Newark (Air) Newark - Princeton -Newark (car) Newark Washington, DC (Air)	N	N	N	NONE
Lateline Television Show (Hollywood, CA) [Guest Appearance on program]	8/18 - 8/21	Minneapolis - Los Angeles - Boston (Washington, DC - Minneapolis, MN Paid for by personal funds)	Y	Y	N	NONE
Politically Incorrect (Television Program) [Appearance on Program]	8/20	One Night's Lodging in Los Angeles	Y	N	N	NONE
Maine Speak Out Project (Ogunquit, ME) [Speech]	8/23	One Night's lodging in Ogunquit, ME (travel paid for by personal funds)	Y	Y	N	NONE
Dolphin Democratic Club (Ft. Lauderdale, FL) [Speech]	9/27 - 9/29	Boston, MA - Miami, FL - Washington, DC	Y	Y	N	NONE
Gay & Lesbian Victory Fund (Washington, DC) [Speech]	9/28	One night's lodging in Miami, FL	Y	Y	N	NONE

SCHEDULE VII -- TRAVEL PAYMENTS AND REIMBURSEMENTS

Identify the source and list travel itinerary, dates, and nature of expenses provided for travel and travel-related expenses totalling more than $250 received by you, your spouse, or a dependent child during the reporting period. Indicate whether a family member accompanied the traveler at the sponsor's expense, and the amount of time, if any, that was not at the sponsor's expense. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor
Exclude: Travel-related expenses provided by federal, state and local governments, or by a foreign government required to be separately reported under the Foreign Gifts and Decorations Act (5 U.S.C. 7342); travel paid for by a Federal political committee; travel provided to a spouse or dependent child that is totally independent of his or her relationship to you. For further information, see Instructions, pages 24-26.

Source	Date(s)	Point of Departure--Destination--Point of Return	Lodging? (Y/N)	Food? (Y/N)	Was a Family Member Included? (Y/N)	Any time not at sponsor's expense
Examples: Chicago Chamber of Commerce	Mar 2	Wash., D.C.-Chicago-Wash., D.C.	N	N	N	N
Mega Corporation	Aug 6-13	Wash., D.C.-Los Angeles-Cleveland	Y	Y	Y	4 Days
Ruth Messinger Mayoral Campaign (New York, NY) - [Campaign Activities]	10/26	Washington, DC - New York, NY - Washington, DC	N	Y	N	NONE
Human Rights Council (West Palm Beach, FL) [Speech]	11/2 - 11/3	Washington, DC - West Palm Beach, FL - Boston, MA	Y	Y	N	NONE
OUT Magazine (New York, NY) [Speech]	11/20 - 11/21	Washington, DC - New York (Train) New York - Providence, RI (Air)	Y	Y	N	NONE
Intl. Conference of Gay & Lesbian Officials (Minneapolis, MN) [Speech]	11/22	One night's lodging in Philadelphia, PA - Travel paid by personal funds	Y	Y	N	NONE
Committee for Concerned Journalists (New York, NY) [Speech]	12/4	Boston, MA - New York, NY - Philadelphia, PA	N	N	N	NONE
National League of Cities (Washington, DC) [Speech]	12/4 -12/5	Philadelphia, PA - Washington, DC	Y	Y	N	NONE

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(5)

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1997

FORM A

For use by Members, officers, and employees

Robert D. Franks & Frances L. Smith

(Full Name)

20 Springholm Drive

(Mailing Address)

Berkeley Heights, NJ 07922

Daytime Telephone: (973)994-9400 Martin S. Barber

(Office Use Only)

Filer Status	[X] Member of the U.S. House of Representatives	State: NJ District: 7	[ ] Officer or Employee	Employing Office	
Report Type	[X] Annual (May 15)	[ ] Amendment		[ ] Termination	Termination Date

A *$200 penalty* shall be assessed against anyone who files more than 30 days late.

PRELIMINARY INFORMATION — ANSWER EACH OF THESE QUESTIONS

I. Did you or your spouse have "earned" income (e.g., salaries or fees) of $200 or more from any source in the reporting period? **If yes, complete and attach Schedule I.** Yes [X] No [ ]

II. Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? **If yes, complete and attach Schedule II.** Yes [ ] No [X]

III. Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? **If yes, complete and attach Schedule III** Yes [X] No [ ]

IV. Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset worth more than $1,000 in the reporting period? **If yes, complete and attach Schedule IV.** Yes [ ] No [X]

V. Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? **If yes, complete and attach Schedule V.** Yes [ ] No [X]

VI. Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $250 and not otherwise exempt)? **If yes, complete and attach Schedule VI.** Yes [ ] No [X]

VII. Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $250 from one source)? **If yes, complete and attach Schedule VII.** Yes [X] No [ ]

VIII. Did you hold any reportable positions on or before the date of filing in the current calendar year? **If yes, complete and attach Schedule VIII.** Yes [X] No [ ]

IX. Did you have any reportable agreement or arrangement with an outside entity? **If yes, complete and attach Schedule IX** Yes [ ] No [X]

Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION — ANSWER EACH OF THESE QUESTIONS

TRUSTS — Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child? Yes [ ] No [X]

EXEMPTION — Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption? Yes [ ] No [X]

CERTIFICATION — THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended. The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct or its designee. Any individual who knowingly and willfully falsifies or who knowingly and willfully fails to file this report may be subject to civil penalties and criminal sanctions (See 5 U.S.C. app. 4, §104 and 18 U.S.C. §1001).

SIGNATURE OF REPORTING INDIVIDUAL: Robert D. Franks

DATE (Month/Day/Year): 5/14/98

1293

Name Robert D. Franks	Page 1 of 1

SCHEDULE I — EARNED INCOME

List the source, type, and amount of earned income from any source (other than the filer's current employment by the U.S. Government) totalling $200 or more during the preceding calendar year. For a spouse, list the source and amount of any honoraria; list only the source for other spouse earned income exceeding $1,000.

Source	Type	Amount
Examples: Keene State	Approved Teaching Fee	$6,000
State of Maryland	Legislative Pension	$9,000
Civil War Roundtable (Oct 2nd)	Spouse Speech	$1,000
Ontario County Board of Education	Spouse Salary	NA
U.S. House of Representatives	Salary	$124,360
Insurance Services Office, Inc.	Spouse Salary	$ 13,616
State of New Jersey	Spouse Salary	$ 59,381
DTC	Spouse	N/A

For payments to charity in lieu of honoraria, use Schedule II.

Name Robert D. Franks | Page 1 of 1

SCHEDULE III — ASSETS AND "UNEARNED" INCOME

BLOCK A — Asset and/or Income Source

Identify (a) each asset held for investment or production of income with a fair market value exceeding $1,000 at the end of the reporting year, and (b) any other asset or source of income which generated more than $200 in "unearned" income during the year. For rental property or land, provide an address. Provide full names of any mutual funds. For an IRA or retirement plan that is *self-directed*, list the underlying assets worth more than $1,000. For an IRA or retirement plan that is not self-directed, name the institution holding the account.

Exclude: Your personal residence(s) (unless there is rental income), any debt owed to you by your spouse, or by your or your spouse's child, parent, or sibling, any deposits totalling $5,000 or less in personal savings accounts, any financial interests in or income derived from U.S. Government retirement programs.

If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC) or is jointly held (JT), in the optional column on the far left.

BLOCK B — Value of Asset at close of reporting year. If you use a valuation method other than fair market value, please specify the method used. If an asset was sold and is included only because it generated income, the value should be "None."

BLOCK C — Type of Income

BLOCK D — Amount of Income For IRA's and retirement plans that are *not* self-directed, you may write in "NA" for income.

BLOCK E — Transaction Indicate if asset was purchased (P), sold (S), or exchanged (E) in reporting year.

	BLOCK A	A None	B $1 – $1,000	C $1,001 – $15,000	E $15,001 – $50,000	F $50,001 – $100,000	G $100,001 – $250,000	H $250,001 – $500,000	I $500,001 – $1,000,000	J $1,000,001 – $5,000,000	K $5,000,001 – $25,000,000	L $25,000,001 – $50,000,000	Over $50,000,000	BLOCK C: DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Type of Income (Specify: For Example: Partnership Income or Farm Income)	BLOCK D: I None	II $1 – $200	III $201 – $1,000	IV $1,001 – $2,500	V $2,501 – $5,000	VI $5,001 – $15,000	VII $15,001 – $50,000	VIII $50,001 – $100,000	IX $100,001 – $1,000,000	X $1,000,001 – $5,000,000	XI Over $5,000,000	BLOCK E
SP, DC, JT	*Examples*		Indefinite			X	X							X		X				Royalties				X		X		X				P, S, E
	Mega Corp. Stock																															P
	Simon & Schuster																															
	1st Bank of Paducah KY accounts																															
	Corestates			X												X						X									
SP	First Union			X												X						X									
	Summit Federal SLA			X												X							X								
SP	Legg Mason			X										X									X								
SP	Legg Mason IRA				X									X		X	X				N/A (IRA)										
SP	ICSO Employees Savings Plan				X																											
	~~Federal Thrift Savings Plan~~				X																											

For additional assets and unearned income, use next page.

Name Robert D. Franks	Page 1 of 1

SCHEDULE VII —TRAVEL PAYMENTS AND REIMBURSEMENTS

Identify the source and list travel itinerary, dates, and nature of expenses provided for travel and travel-related expenses totalling more than $250 received by you, your spouse, or a dependent child during the reporting period. Indicate whether a family member accompanied the traveler at the sponsor's expense, and the amount of time, if any, that was not at the sponsor's expense. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor.

Exclude: Travel-related expenses provided by federal, state, and local governments, or by a foreign government required to be separately reported under the Foreign Gifts and Decorations Act (5 U.S.C. § 7342); travel paid for by a Federal political committee; travel provided to a spouse or dependent child that is totally independent of his or her relationship to you.

	Source	Date(s)	Point of Departure—Destination—Point of Return	Lodging? (Y/N)	Food? (Y/N)	Was a Family Member Included? (Y/N)	Any time not at sponsor's expense
Examples	Chicago Chamber of Commerce	Mar 2	Wash., D.C.—Chicago—Wash., D.C.	N	N	N	N
	Roycroft Corporation	Aug 6–13	Wash., D.C.—Los Angeles—Cleveland	Y	Y	Y	4 Days
	Aspen Institute	Mar 7-9	Wash, DC-Hershey, PA-Wash, DC	Y	Y	Y	N

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SCHEDULE VIII — POSITIONS

Report all positions, compensated or uncompensated, held during the current calendar year as an officer, director, trustee of an organization, partner, proprietor, representative, employee, or consultant of any corporation, firm, partnership, or other business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States.

Exclude: Positions held in any religious, social, fraternal, or political entities; positions solely of an honorary nature; and positions listed on Schedule I.

Position	Name of Organization
Board of Managers	Children's Specialized Hospital
Advisory Board	The Occupational Center
Board of Directors	Cerebral Palsey Association of Middlesex County
Advisory Board	United Family and Children's Society of Plainfield
Honorary Board Member	Armenian Genocide Memorial Museum of America
Friend	Garden State Cancer Center

SCHEDULE IX — AGREEMENTS

Identify the date, parties to, and general terms of any agreement or arrangement with respect to future employment; a leave of absence during the period of government service; continuation or deferral of payments by a former or current employer other than the U.S. Government; or continuing participation in an employee welfare or benefit plan maintained by a former employer.

Date	Parties To	Terms of Agreement

GPO 1998 46-260 (mac)

Use additional sheets if more space is required.

RODNEY P. FRELINGHUYSEN
11TH DISTRICT, NEW JERSEY
COMMITTEE
APPROPRIATIONS
SUBCOMMITTEES
VETERANS, HOUSING AND INDEPENDENT AGENCIES
ENERGY AND WATER
FOREIGN OPERATIONS, EXPORT FINANCING AND RELATED AGENCIES

HAND DELIVERED

WASHINGTON OFFICE
228 CANNON BUILDING
WASHINGTON, DC 20515-3011
(202) 225-5034
DISTRICT OFFICE
1 MORRIS STREET
MORRISTOWN, NJ 07960
(973) 984-0711

Congress of the United States
House of Representatives
Washington, DC 20515-3011

COMM MAY 15 PM 3:03

May 15, 1998

38

Hon. James Hansen
Chairman
Committee on Standards of Official Conduct
HT2 Capitol
Washington, D.C. 20515

Dear Mr. Chairman:

With regard to my 1997 Financial Disclosure, please note the following:

While ordinarily it is required to report the amount of income for specific assets comprising a trust, I have reported the total amount of income received for each trust. I have done so because income I receive from these trusts is a "discretionary distribution" and does not necessarily equal the actual earnings of specific holdings in each trust. Therefore, as reflected in this disclosure, the total amount of income reflected is the total amount of income I received from each trust. I have reported all year-end values and type of income for each asset within each trust.

In consultation with staff of the Committee, I am advised that this filing is therefore sufficient. If you need any additional information, please do let me know.

Sincerely,

Rodney P. Frelinghuysen
Member of Congress

RPF:dm

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1997

FORM A
For use by Members, officers, and employees

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HAND DELIVERED
(Office Use Only)

Rodney P. Frelinghuysen
(Full Name)

335 James Street
(Mailing Address)

Morristown, New Jersey 07960

(908) 439-3499 (Tina)
Daytime Telephone
(202) 225-5034 (Rodney)

Filer Status	[X] Member of the U.S. House of Representatives	State New Jersey District 11	[ ] Officer or Employee	Employing Office	A *$200 penalty* shall be assessed against anyone who files more than 30 days late.
Report Type	[X] Annual (May 15)	[ ] Amendment	[ ] Termination	Termination Date	

PRELIMINARY INFORMATION — ANSWER EACH OF THESE QUESTIONS

I. Did you or your spouse have "earned" income (e.g., salaries or fees) of $200 or more from any source in the reporting period? **If yes, complete and attach Schedule I.** — Yes [ ] No [X]

II. Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? **If yes, complete and attach Schedule II.** — Yes [X] No [ ]

III. Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? **If yes, complete and attach Schedule III.** — Yes [X] No [ ]

IV. Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset worth more than $1,000 in the reporting period? **If yes, complete and attach Schedule IV.** — Yes [X] No [ ]

V. Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? **If yes, complete and attach Schedule V.** — Yes [X] No [ ]

VI. Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $250 and not otherwise exempt)? **If yes, complete and attach Schedule VI.** — Yes [ ] No [X]

VII. Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $250 from one source)? **If yes, complete and attach Schedule VII.** — Yes [X] No [ ]

VIII. Did you hold any reportable positions on or before the date of filing in the current calendar year? **If yes, complete and attach Schedule VIII.** — Yes [X] No [ ]

IX. Did you have any reportable agreement or arrangement with an outside entity? **If yes, complete and attach Schedule IX** — Yes [ ] No [X]

Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION — ANSWER EACH OF THESE QUESTIONS

TRUSTS—Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child? — Yes [X] No [ ]

EXEMPTION—Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption? — Yes [ ] No [X]

CERTIFICATION — THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended. The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct or its designee. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil penalties and criminal sanctions (*See* 5 U.S.C. app. 4, §104 and 18 U.S.C. §1001).

SIGNATURE OF REPORTING INDIVIDUAL Rodney P. Frelinghuysen

DATE (Month/Day/Year) May 15, 98

1299

SCHEDULE I — EARNED INCOME

List the source, type, and amount of earned income from any source (other than the filer's current employment by the U.S. Government) totalling $200 or more during the preceding calendar year. For a spouse, list the source and amount of any honoraria; list only the source for other spouse earned income exceeding $1,000

	Source	Type	Amount
Examples	Keene State	Approved Teaching Fee	$6,000
	State of Maryland	Legislative Pension	$9,000
	Civil War Roundtable (Oct. 2nd)	Spouse Speech	$1,000
	Ontario County Board of Education	Spouse Salary	NA
	NONE		

For payments to charity in lieu of honoraria, use Schedule II.

SCHEDULE II — PAYMENTS IN LIEU OF HONORARIA MADE TO CHARITY

List the source, activity (i.e., speech, appearance, or article), date, and amount of any payment made by the sponsor of an event to a charitable organization in lieu of an honorarium. A separate confidential list of charities receiving such payments must be filed directly with the Committee on Standards of Official Conduct. An envelope for transmitting the list is included in each Member's filing package.

Source	Activity	Date	Amount
Examples Association of American Associations, Wash., D.C. XYZ Magazine	Speech Article	Feb. 2, 1997 Aug. 13, 1997	$2,000 $500
KMART Family Foundation	KMART Kids Race Against Drugs (Lawn Tractor Race)	Sept. 10, 1997	$500.00

This page may be copied if more space is required.

SCHEDULE III — ASSETS AND "UNEARNED" INCOME

BLOCK A — Asset and/or Income Source

Identify (a) each asset held for investment or production of income with a fair market value exceeding $1,000 at the end of the reporting year, and (b) any other asset or source of income which generated more than $200 in "unearned" income during the year. For rental property or land, provide an address. Provide full names of any mutual funds. For an IRA or retirement plan that is *self-directed*, list the underlying assets worth more than $1,000. For an IRA or retirement plan that is not selfdirected, name the institution holding the account.

Exclude: Your personal residence(s) (unless there is rental income); any debt owed to you by your spouse, or by your or your spouse's child, parent, or sibling; any deposits totalling $5,000 or less in personal savings accounts; any financial interests in or income derived from U.S. Government retirement programs.

If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC) or is jointly held (JT), in the optional column on the far left.

SP		SP	Mega Corp. Stock
DC	*Examples*		Simon & Schuster
JT			1st Bank of Paducah, KY accounts

BLOCK B — Value of Asset

at close of reporting year
If you use a valuation method other than fair market value, please specify the method used.
If an asset was sold and is included only because it generated income, the value should be "None."

	A	B	C		E	F	G	H	I	J	K	L
	None	$1 – $1,000	$1,001 – $15,000	$15,001 – $50,000	$50,001 – $100,000	$100,001 – $250,000	$250,001 – $500,000	$500,001 – $1,000,000	$1,000,001 – $5,000,000	$5,000,001 – $25,000,000	$25,000,001 – $50,000,000	Over $50,000,000
Mega Corp. Stock					X							
Simon & Schuster			Indefinite									
1st Bank of Paducah, KY accounts						X						

BLOCK C — Type of Income

	DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Type of Income (Specify. For Example: Partnership Income or Farm Income)
Mega Corp. Stock	X						
Simon & Schuster							Royalties
1st Bank of Paducah, KY accounts			X				

BLOCK D — Amount of Income

For IRA's and retirement plans that are *not* self-directed, you may write in "NA" for income

	I	II	III	IV	V	VI	VII	VIII	IX	X	XI
	None	$1 – $200	$201 – $1,000	$1,001 – $2,500	$2,501 – $5,000	$5,001 – $15,000	$15,001 – $50,000	$50,001 – $100,000	$100,001 – $1,000,000	$1,000,001 – $5,000,000	Over $5,000,000
Mega Corp. Stock				X							
Simon & Schuster						X			X		
1st Bank of Paducah, KY accounts											

BLOCK E — Transaction

Indicate if asset was purchased (P), sold (S), or exchanged (E) in reporting year

P, S, E
P

See Continuation Sheets
Pages 5 thru 25

For additional assets and unearned income, use next page.

1302

ETHICS IN GOVERNMENT ACT - FINANCIAL DISCLOSURE STATEMENT

RODNEY P. FRELINGHUYSEN

CONTINUATION SHEET - SCHEDULE III

ASSETS	YEAR-END VALUE	INCOME TYPE	1997 INCOME	1997 TRANSACTION
Johnson & Johnson	H	DIV	VI	
Pall Corp.	F	DIV	VI	DIV REINVEST.
Peapack Gladstone Bank - NJ	A	DIV	III	EXCHANGE
Peapack Gladstone Financial Corp.	E	DIV	I	EXCHANGE
Summit Bancorp. - NJ	F	DIV	V	
Valley National Bancorp - NJ	C	DIV	II	
Procter & Gamble Co.	I	DIV	VII	DIV REINVEST.
International Business Machines	H	DIV	V	DIV REINVEST.
Eli Lilly & Co.	I	DIV	VI	DIV REINVEST.
Computer Technology (IRA)	C	NONE	I	
Freedom Cash Management Fund(IRA)	C	DIV	II	
Peapack Gladstone Bank (CKG)	F	INT	IV	
Chase Manhattan(SVGS)	C	INT	III	

ETHICS IN GOVERNMENT ACT - FINANCIAL DISCLOSURE STATEMENT

RODNEY P. FRELINGHUYSEN

CONTINUATION SHEET - SCHEDULE III

ASSETS	YEAR-END VALUE	INCOME TYPE	1997 INCOME	1997 TRANSACTION
Federated U.S. Treasury	D	INT	VI	Redeemed
Motorola, Inc.	D	DIV	III	
Intel Corp.	D	DIV	I	P
First Pioneer Farm Credit, ACA Depreciating Member Ownership of 5% of loan balance	A	NONE	I	SOLD
17.923 Acres unimproved land, Frelinghuysen Twp., NJ (Commercial Value 2/26/97)	F			SOLD
1/5th undivided interest in 235.8 acres of unimproved land, Stockbridge, Ma. (Est.Value)	E			
22.84 Acres unimproved land, Green Twp., NJ	A			SOLD

ETHICS IN GOVERNMENT ACT - FINANCIAL DISCLOSURE STATEMENT

RODNEY P. FRELINGHUYSEN

CONTINUATION SHEET - SCHEDULE III

ASSETS	YEAR-END VALUE	INCOME TYPE	1997 INCOME	1997 TRANSACTION
Congressional Federal Credit Union	C	Int	III	
Aetna, Inc.	B	Div	III	
Citizens Utilities Co. - Ser A	A	NONE	I	SOLD
First Union Corp.	D	DIV	III	
Merck & Co., Inc.	G	DIV	V	
Pfizer, Inc.	F	DIV	IV	
Tambrands, Inc.	A	DIV	III	SOLD
Thomas & Betts Corp.	D	DIV	III	
Warner Lambert Co.	F	DIV	IV	PURCHASED
CATS - PRIN - Ser K	C	OID INT	II	
CATS - PRIN - Ser M	D	OID INT	III	
CATS - PRIN - Ser Q	C	OID INT	III	

ETHICS IN GOVERNMENT ACT - FINANCIAL DISCLOSURE STATEMENT

RODNEY P. FRELINGHUYSEN

CONTINUATION SHEET - SCHEDULE III

Identity : Marital Trust U/W Rodney Procter, Peter H. B. Frelinghuysen, Trustee (1/10th income interest)*

All Assets listed are held in trust, and all transactions are initiated by the Trustee

Rodney P. Frelinghuysen is neither consulted nor gives advise regarding these investments.

Rodney P. Frelinghuysen does not receive monthly, quarterly, yearly reports of any type regarding this trust, excepting the Yearly K-1. Therefore, it qualifies as an Excepted Trust.

1997 Income received IV

ETHICS IN GOVERNMENT ACT - FINANCIAL DISCLOSURE STATEMENT

RODNEY P. FRELINGHUYSEN

CONTINUATION SHEET - SCHEDULE III

Identity : Non-Marital Trust U/W Rodney Procter, Peter H. B. Frelinghuysen, Trustee (1/10th income interest)*

All Assets listed are held in trust, and all transactions are initiated by the Trustee

Rodney P. Frelinghuysen is neither consulted nor gives advise regarding these investments.

Rodney P. Frelinghuysen does not receive monthly, quarterly, or yearly reports of any type regarding this trust, excepting the Yearly K-1. Therefore, it qualifies as an Excepted Trust.

1997 Income received IX

ETHICS IN GOVERNMENT ACT - FINANCIAL DISCLOSURE STATEMENT

RODNEY P. FRELINGHUYSEN

CONTINUATION SHEET - SCHEDULE III

Identity : A.H. Frelinghuysen 1950 Trust ,
Peter H. B. Frelinghuysen and Henry O.H. Frelinghuysen,
Trustees (1/5 income interest)*

All Assets listed are held in trust, and all transactions are initiated by the Trustee

Rodney P. Frelinghuysen is neither consulted nor gives advise regarding these investments.

Rodney P. Frelinghuysen does not receive monthly, quarterly, or yearly reports of any type regarding this trust, excepting the Yearly K-1. Therefore, it qualifies as an Excepted Trust.

1997 Income received VII

ETHICS IN GOVERNMENT ACT - FINANCIAL DISCLOSURE STATEMENT

RODNEY P. FRELINGHUYSEN

CONTINUATION SHEET - SCHEDULE III

Identity : Peter H.B. Frelinghuysen Trust U/D dated 1/17/57, Peter H.B. Frelinghuysen and George L. K. Frelinghuysen, Trustees (1/8th income interest)*

All Assets listed are held in trust, and all transactions are initiated by the Trustee

Rodney P. Frelinghuysen is neither consulted nor gives advise regarding these investments.

Rodney P. Frelinghuysen does not receive monthly, quarterly, or yearly reports of any type regarding this trust, excepting the Yearly K-1. Therefore, it qualifies as an Excepted Trust.

1997 Income Received VII

1309

ETHICS IN GOVERNMENT ACT - FINANCIAL DISCLOSURE STATEMENT

RODNEY P. FRELINGHUYSEN

CONTINUATION SHEET - SCHEDULE III

Identity : B. P. Frelinghuysen Trust U/A
4/3/73 Banker's Trust Company, New York, NY
Trustee (discretionary income interest)*

HOLDINGS	YEAR-END VALUATION	INCOME TYPE	1997 TRANSACTION
Knight Ridder, Inc.	E	DIV	
Merck & Co., Inc.	G	DIV	
Procter & Gamble Co.	I	DIV	S
Thomas & Betts Corp.	E	DIV	
USX - Marathon Group	D	DIV	
USX - U S Steel	C	DIV	
Banker's Trust Co. Tax Free Income Fund	F	DIV	
Banker's Trust Money Market Account	F	INT	
Warner Lambert Co.	D	DIV	P

* All Assets listed are held in trust, and all transactions are initiated by the Trustee. Rodney P. Frelinghuysen is neither consulted nor gives advise regarding these investments However, Rodney P. Frelinghuysen does receive quarterly statements regarding this trust.

1997 Income Received VI

ETHICS IN GOVERNMENT ACT - FINANCIAL DISCLOSURE STATEMENT

RODNEY P. FRELINGHUYSEN

CONTINUATION SHEET - SCHEDULE III

Identity : B. S. Procter Trust U/D dated 5/31/60, Henry O.H. Frelinghuysen and Mac Donald Budd, Trustees (discretionary 1/6 income interest)*

Trust split into Individual Trusts
after death of main beneficiary-See new 5/31/60 Trust
with Rodney P. Frelinghuysen as co-trustee

1997 Income received A

ETHICS IN GOVERNMENT ACT - FINANCIAL DISCLOSURE STATEMENT

RODNEY P. FRELINGHUYSEN

CONTINUATION SHEET - SCHEDULE III

Identity : B. S. Procter Trust U/A
5/31/60 F/B/O Rodney P. Frelinghuysen
Peter Frelinghuysen & Rodney P. Frelinghuysen, Trustees

HOLDINGS	YEAR-END VALUATION	INCOME TYPE	1997 TRANSACTION
Abbott Laboratories	F	DIV	
Allegran, Inc	D	DIV	
Bristol Myers Squibb Co.	F	DIV	
Corn Prods Int'l, Inc.	E	DIV	
Cognizant Corp.	D	DIV	
Dun & Bradstreet Corp.	C	DIV	
Gannett Co., Inc.	D	DIV	
H. J. Heinz Company	D	DIV	
Pepsico, Inc.	F	DIV	
Procter & Gamble Co.	J	DIV	
Electronic Data System Corp.	D	DIV	
Fluor Corp.	C	DIV	

ETHICS IN GOVERNMENT ACT - FINANCIAL DISCLOSURE STATEMENT

RODNEY P. FRELINGHUYSEN

CONTINUATION SHEET - SCHEDULE III

Identity : B. S. Procter Trust U/A
5/31/60 F/B/O Rodney P. Frelinghuysen
Peter Frelinghuysen & Rodney P. Frelinghuysen, Trustees

HOLDINGS	YEAR-END VALUATION	INCOME TYPE	1997 TRANSACTION
Harcourt Gen., Inc.	D	DIV	
Loews Corp.	F	DIV	
Motorola, Inc.	D	DIV	
CSX Corporation	E	DIV	
A T & T Corporation	D	DIV	
Lucent Technologies, Inc.	C	DIV	
Southern New England Telecomm Corp.	D	DIV	
Harcourt Gen., Inc. Ser A Conv.	D	DIV	
Puerto Rico New Pub. Hsg Authority Urban	C	INT	
New Jersey St. Trans. Tr Fd. Authority	B	INT	

ETHICS IN GOVERNMENT ACT - FINANCIAL DISCLOSURE STATEMENT

RODNEY P. FRELINGHUYSEN

CONTINUATION SHEET - SCHEDULE III

Identity : B. S. Procter Trust U/A
5/31/60 F/B/O Rodney P. Frelinghuysen
Peter Frelinghuysen & Rodney P. Frelinghuysen, Trustees

HOLDINGS	YEAR-END VALUATION	INCOME TYPE	1997 TRANSACTION
North Brunswick Twp, N.J.	B	INT	
Money Market Fund	G	INT	
Tricon Global Restaurants, Inc.	C	DIV	Spin off-Pepsico
1997 Income Received		IX	

ETHICS IN GOVERNMENT ACT - FINANCIAL DISCLOSURE STATEMENT

RODNEY P. FRELINGHUYSEN

CONTINUATION SHEET - SCHEDULE III

Identity : V. T. Robinson Trust U/A dated 4/10/80, Fiduciary Trust Company, Boston, Ma. Trustee (spouse discretionary income interest)*

HOLDINGS	YEAR-END VALUATION	INCOME TYPE	1997 TRANSACTION
Scudder Institutional Tax Free Fund	A	INT	REDEEMED
U. S. Treasury Notes	G	INT	
U. S. Treasury Bonds	E	INT	
Voorhees Twp. NJ Bd of Ed	E	INT	
Passaic Cty NJ Ref - Gen Imp	E	INT	
New Jersey St. Trans. Tr. Fd Auth. Bond	F	INT	P
Newark, NJ Sch. Qualified Bond	F	INT	P
Port Auth. NY & NJ Cons.	F	INT	P

* All Assets listed are held in trust, and all transactions are initiated by the Trustee

Rodney P. Frelinghuysen is neither consulted nor gives advise regarding these investments.

Spouse does receive quarterly statements regarding this trust.

ETHICS IN GOVERNMENT ACT - FINANCIAL DISCLOSURE STATEMENT

RODNEY P. FRELINGHUYSEN

CONTINUATION SHEET

HOLDINGS	YEAR-END VALUATION	INCOME TYPE	1997 TRANSACTION
Deptford Twp.NJ School District	F	INT	
Home Depot, Inc.	F	DIV	S
Tricon Global Restaurants	C	DIV	Rec.d as Stk.Div. fr Pepsico
CPC International	D	DIV	
Coca Cola Co.	F	DIV	S
General Mills	E	DIV	
Pepsico, Inc.	F	DIV	S
Phillip Morris Cos., Inc.	F	DIV	
Procter & Gamble Co.	D	DIV	
Sara Lee Corp.	E	DIV	
Bristol Myers Squibb Co.	D	DIV	
Merck & Co., Inc.	F	DIV	
Pfizer, Inc.	G	DIV	S

ETHICS IN GOVERNMENT ACT - FINANCIAL DISCLOSURE STATEMENT

RODNEY P. FRELINGHUYSEN

CONTINUATION SHEET

HOLDINGS	YEAR-END VALUATION	INCOME TYPE	1997 TRANSACTION
Schering Plough Corp.	D	DIV	
Aetna, Inc.	E	DIV	
Hartford Steam Boiler Insp. & Ins.	D	DIV	
J.P. Morgan & Co.	F	DIV	
Time Warner, Inc.	A	DIV	S
Electronic Data Systems Corp.	E	DIV	
H & R Block	A	DIV	S
Reuters Holdings PLC ADR B	D	DIV	
General Electric Co.	G	DIV	S
Emersen Electric Co.	E	DIV	
Parker - Hannifin Corp.	F	DIV	
Hewlett - Packard	F	DIV	
Intel Corp.	E	DIV	

ETHICS IN GOVERNMENT ACT - FINANCIAL DISCLOSURE STATEMENT

RODNEY P. FRELINGHUYSEN

CONTINUATION SHEET

HOLDINGS	YEAR-END VALUATION	INCOME TYPE	1997 TRANSACTION
International Business Machines	C	DIV	
Microsoft Corp.	G	NONE	S
Motorola, Inc.	E	DIV	
Atlantic Richfield	F	DIV	
Enron Corp.	D	DIV	
Exxon Corp.	F	DIV	
Royal Dutch Petroleum Co.	E	DIV	
Union Pacific Corp.	E	DIV	
Union Pacific Resources Group	D	DIV	
Morgan Stanley Emerging Mkt. Funds	D	DIV	
Scudder Int'l Fund	F	DIV	P
AT & T Corp.	A	DIV	S
Lucent Technologies	C	DIV	
Telefonica De Espana S.A.	A	DIV	S

ETHICS IN GOVERNMENT ACT - FINANCIAL DISCLOSURE STATEMENT

RODNEY P. FRELINGHUYSEN

CONTINUATION SHEET

HOLDINGS	YEAR-END VALUATION	INCOME TYPE	1997 TRANSACTION
Banc One Corp.	D	DIV	
Federal Nat'l Mortgage Assn.	D	DIV	
First Data Corp.	D	DIV	
Cisco Systems, Inc.	E	INT	P
L. M. Ericsson Tel CL 'B'	D	DIV	P
Scudder Tax Free Money Market	C	INT	P
1997 Income Received		VIII	

ETHICS IN GOVERNMENT ACT - FINANCIAL DISCLOSURE STATEMENT

RODNEY P. FRELINGHUYSEN

CONTINUATION SHEET - SCHEDULE III

Identity : H. S. Robinson Trust U/A dated
12/16/82, Fiduciary Trust Company, Boston, Ma.
Trustee (spouse discretionary income beneficiary)*

HOLDINGS	YEAR-END VALUATION	INCOME TYPE	1997 TRANSACTION
U. S. Treasury Notes (Various)	F	INT	
Randolph Twp. NJ Muni Bond	E	INT	
NJ Sports Expo Auth	E	INT	
NJ (Tax Exempt) Muni Bond	E	INT	
Florida St Bd of Ed	D	INT	
Banc One Corp. $3.50 Conv Pfd C	E	DIV	
Coca Cola Co.	F	DIV	

* All Assets listed are held in trust, and all transactions are initiated by the Trustee

Rodney P. Frelinghuysen is neither consulted nor gives advise regarding these investments.

Spouse does receive quarterly statements regarding this trust.

ETHICS IN GOVERNMENT ACT - FINANCIAL DISCLOSURE STATEMENT

RODNEY P. FRELINGHUYSEN

CONTINUATION SHEET

HOLDINGS	YEAR-END VALUATION	INCOME TYPE	1997 TRANSACTION	
General Mills	E	DIV		
Phillip Morris Cos., Inc.	F	DIV		
Sara Lee Corp.	E	DIV		
Abbott Labs	E	DIV		
Merck & Co., Inc.	F	DIV		
Johnson & Johnson	E	DIV		
Warner Lambert	F	DIV		
AT & T Corp.	D	DIV	Cost basis adj. for spin-off	
Lucent Technologies	D	DIV		
Bell South Corp.	F	DIV		
American Int'l Group	F	DIV		
J.P. Morgan & Co.	E	DIV		
Gannett Co.	A	DIV	S	
Electronic Data Systems Corp.	E	DIV		

ETHICS IN GOVERNMENT ACT - FINANCIAL DISCLOSURE STATEMENT

RODNEY P. FRELINGHUYSEN

CONTINUATION SHEET

HOLDINGS	YEAR-END VALUATION	INCOME TYPE	1997 TRANSACTION
Reuters Holdings PLC ADR	E	DIV	
Emerson Electric	E	DIV	
General Electric Co.	F	DIV	
Parker - Hannifin Corp.	E	DIV	
Hewlett - Packard	E	DIV	
Intel Corp.	F	DIV	
Microsoft Corp.	F	DIV	
Motorola, Inc.	E	DIV	
Atlantic Richfield	A	DIV	S
Exxon Corp.	F	DIV	
Royal Dutch Petroleum	F	DIV	
Federal Nat'l Mortgage Assn.	E	DIV	
Pfizer, Inc.	E	DIV	
First Data Corp.	D	DIV	

ETHICS IN GOVERNMENT ACT - FINANCIAL DISCLOSURE STATEMENT

RODNEY P. FRELINGHUYSEN

CONTINUATION SHEET

HOLDINGS	YEAR-END VALUATION	INCOME TYPE	1997 TRANSACTION
Montclair NJ Gen. Oblig.	E	INT	P
Newark NJ Sch. Qualified Bond	E	INT	P
Cisco Systems, Inc.	D	DIV	P
L. M. Ericsson Tel. CL'B'	D	DIV	P
NCR Corp.	A	DIV	Spin-off from AT&T
Scudder Tax Free Money Market	D	INT	P
1997 Income Received		VII	

SCHEDULE IV — TRANSACTIONS

Report any purchase, sale, or exchange by you, your spouse, or dependent child during the reporting year of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child, or the purchase or sale of your personal residence, unless it is rented out.

SP, DC, JT	Asset	Type of Transaction: PURCHASE	SALE	EXCHANGE	Date (MO/DAY/YR)	Amount of Transaction: B ($1,001–$15,000)	C ($15,001–$50,000)	D ($50,001–$100,000)	E ($100,001–$250,000)	F ($250,001–$500,000)	G ($500,001–$1,000,000)	H ($1,000,001–$5,000,000)	I ($5,000,001–$25,000,000)	J ($25,000,001–$50,000,000)	K (Over $50,000,000)
SP	*Example* Mega Corporation Common Stock	X			10-12-97		X								
	See Continuation Sheets														
	Pages 27 thru 34														

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ETHICS IN GOVERNMENT ACT - FINANCIAL DISCLOSURE STATEMENT

RODNEY P. FRELINGHUYSEN

CONTINUATION SHEET - SCHEDULE IV

DATE	ASSET	TYPE OF TRANSACTION	AMOUNT OF TRANSACTION
Qtrly. Div. Re-Invest.	Pall Corporation	P	B
Qtrly. Div. Re-Invest.	Procter & Gamble	P	C
Qtrly. Div. Re-Invest.	International Business Machines	P	B
Qtrly. Div. Re-Invest.	Eli Lilly & Co.	P	B
02/26/97	First Pioneer Farm Credit, ACA -Depreciating Member Ownership of 5% of loan balance.	S	
02/26/97	113.519 Acres Unimproved Land Frelinghuysen Twp., NJ	S	G
02/26/97	22.84 Acres Unimproved Land Green Twp., NJ	S	
07/23/97	Tambrands, Inc.	S	C
07/23/97	Citizens Utilities	S	C
12/02/97	Intel Corp.	P	C
12/02/97	Warner Lambert	P	D

ETHICS IN GOVERNMENT ACT - FINANCIAL DISCLOSURE STATEMENT

RODNEY P. FRELINGHUYSEN

CONTINUATION SHEET

12/30/97	Peapack Gladstone Bank - NJ	E	Even Exchange
12/30/97	Peapack Gladstone Financial Corp.	E	Even Exchange
Various	Federated U. S. Treasury	Redeemed	C

ETHICS IN GOVERNMENT ACT - FINANCIAL DISCLOSURE STATEMENT

RODNEY P. FRELINGHUYSEN

CONTINUATION SHEET - SCHEDULE IV

Identity : B. P. Frelinghuysen Trust U/A
4/3/73 Banker's Trust Company, New York; NY
Trustee (discretionary income interest)*

DATE	ASSET	TYPE OF TRANSACTION	AMOUNT OF TRANSACTION
09/17/97	Procter & Gamble	S	E
Various	Banker's Trust Money Market Acct.	P	E
Various	Banker's Trust Money Market Acct.	S	C
12/23/97	Warner Lambert	P	C

ETHICS IN GOVERNMENT ACT - FINANCIAL DISCLOSURE STATEMENT

RODNEY P. FRELINGHUYSEN

CONTINUATION SHEET - SCHEDULE IV

Identity : B. S. Procter Trust U/A
5/31/60 F/B/O Rodney P. Frelinghuysen
Peter Frelinghuysen & Rodney P. Frelinghuysen, Trustees

DATE	ASSET	TYPE OF TRANSACTION	AMOUNT OF TRANSACTION
01/02/97	NCR Corp. - Rec'd as spin-off from AT&T. AT&T cost basis adj. for value	Spin-off	B
08/04/97	NCR Corp.	S	Under $1,000
08/15/97	NY State Bond	Redeemed	C
Various	Money Market Acct	P	C
Various	Money Market Acct	S	C
10/08/97	Tricon Global -Rec'd as Stock Dividend from Pepsico	Stock Dividend	Under $1,000

ETHICS IN GOVERNMENT ACT - FINANCIAL DISCLOSURE STATEMENT

RODNEY P. FRELINGHUYSEN

CONTINUATION SHEET - SCHEDULE IV

Identity : V. T. Robinson Trust U/A dated 4/10/80, Fiduciary Trust Company, Boston, Ma. Trustee (spouse discretionary income interest)

DATE	ASSET	TYPE OF TRANSACTION	AMOUNT OF TRANSACTION
02/10/97	Time Warner, Inc.	Sold	B
02/10/97	H & R Block	Sold	C
02/10/97	A T & T Corp.	Sold	B
02/10/97	Telefonica De Espana S.A.	Sold	C
02/10/97	Cisco Systems	Purchased	C
02/10/97	Pfizer	Sold	C
02/10/97	Microsoft	Sold	C
02/11/97	New Jersey St. Trans. Tr. Fd.	Purchased	D
02/12/97	Port Auth. NY & NJ Cons.	Purchased	D
08/28/97	Microsoft	Sold	D
08/28/97	Coca Cola	Sold	C
08/28/97	General Electric	Sold	C

ETHICS IN GOVERNMENT ACT - FINANCIAL DISCLOSURE STATEMENT

RODNEY P. FRELINGHUYSEN

CONTINUATION SHEET

08/28/97	Home Depot	Sold	C
08/28/97	Pepsico	Sold	C
08/28/97	Pfizer	Sold	D
08/28/97	L. M. Ericsson Tel. CL'B'	Purchased	D
09/11/97	Newark NJ Sch. Qualified Bond	Purchased	E
10/08/97	Tricon Global Restaurants	Taxable Stk.Div	Under $1,000
Various	Scudder Tax Free Money Market	Purchased	C
Various	Scudder Institutional Tax Free Fund	Redeemed	E
Various	Scudder Int'l Fund	Purchased	B

ETHICS IN GOVERNMENT ACT - FINANCIAL DISCLOSURE STATEMENT

RODNEY P. FRELINGHUYSEN

CONTINUATION SHEET - SCHEDULE IV

Identity : H. S. Robinson Trust U/A dated 12/16/82, Fiduciary Trust Company, Boston, Ma. Trustee (Spouse discretionary income beneficiary)

DATE	ASSET	TYPE OF TRANSACTION	AMOUNT OF TRANSACTION
Various	Scudder Tax Free Money Market	Purchase	C
01/09/97	NCR Corp. - Rec'd as spin-off from AT&T Corp. AT&T holdings cost basis adj. for value	Spin-off	B
01/09/97	Gannett Co.	Sold	C
01/29/97	NCR Corp.	Sold	B
02/10/97	Atlantic Richfield	Sold	C
02/10/97	Microsoft Corp.	Sold	C
02/10/97	Cisco Systems, Inc.	Purchase	C
02/10/97	General Electric	Sold	C
02/20/97	Montclair, NJ Obligations	Purchase	C
08/28/97	L. M. Ericsson Tel. CL'B'	Purchase	C
08/28/97	Microsoft Corp.	Sold	C
08/28/97	Intel Corp.	Sold	B

ETHICS IN GOVERNMENT ACT - FINANCIAL DISCLOSURE STATEMENT

RODNEY P. FRELINGHUYSEN

CONTINUATION SHEET

08/28/97	Parker Hannifin	Sold	B
08/28/97	Warner Lambert	Sold	B
08/28/97	J. P. Morgan	Sold	B
08/28/97	American Int'l Group	Sold	B
08/28/97	Merck	Sold	B
08/28/97	Coca Cola	Sold	C
08/28/97	General Electric	Sold	C
09/11/97	Newark NJ Sch. Qualified Bond	Purchase	C

SCHEDULE V — LIABILITIES

Report liabilities of over $10,000 owed to any one creditor ***at any time*** during the reporting period by you, your spouse, or dependent child. Mark the highest amount owed during the year. **Exclude**: Any mortgage on your personal residence (unless it is rented out), loans secured by automobiles, household furniture, or appliances, and liabilities owed to a spouse, or the child, parent, or sibling of you or your spouse. Report ***revolving charge accounts*** only if the balance at the end of the reporting period exceeded $10,000.

SP, DC, JT	Creditor	Type of Liability	Amount of Liability									
			B $10,001– $15,000	C $15,001– $50,000	D $50,001– $100,000	E $100,001– $250,000	F $250,001– $500,000	G $500,001– $1,000,000	H $1,000,001– $5,000,000	I $5,000,001– $25,000,000	J $25,000,001– $50,000,000	K Over $50,000,000
Example	First Bank of Wilmington, Delaware	Mortgage on 123 Main St., Dover, Del.				X						
	First Pioneer Farm Credit, ACA	Mortgage on Real Estate in Frelinghuysen Twp.			X							

SCHEDULE VI — GIFTS

Report the source, a brief description, and the value of all gifts totalling more than $250 received by you, your spouse, or a dependent child from any source during the year.

Exclude: Gifts from relatives, gifts of personal hospitality of an individual, local meals, and gifts to a spouse or dependent child that are totally independent of his or her relationship to you. Gifts with a value of $100 or less need not be added towards the $250 disclosure threshold.

Note: The gift rule (House Rule 51) prohibits gifts except as specifically provided in the rule.

Source	Description	Value
Example Mr. Joseph H. Smith, Anytown, Anystate	Silver Platter (determination on personal friendship received from Committee on Standards)	$270

Use additional sheets if more space is required.

SCHEDULE VII —TRAVEL PAYMENTS AND REIMBURSEMENTS

Identify the source and list travel itinerary, dates, and nature of expenses provided for travel and travel-related expenses totalling more than $250 received by you, your spouse, or a dependent child during the reporting period. Indicate whether a family member accompanied the traveler at the sponsor's expense, and the amount of time, if any, that was not at the sponsor's expense. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor.

Exclude: Travel-related expenses provided by federal, state, and local governments, or by a foreign government required to be separately reported under the Foreign Gifts and Decorations Act (5 U.S.C. § 7342); travel paid for by a Federal political committee; travel provided to a spouse or dependent child that is totally independent of his or her relationship to you.

Source	Date(s)	Point of Departure—Destination—Point of Return	Lodging? (Y/N)	Food? (Y/N)	Was a Family Member Included? (Y/N)	Any time not at sponsor's expense
Examples: Chicago Chamber of Commerce	Mar. 2	Wash., D.C.—Chicago—Wash., D.C.	N	N	N	N
Roycroft Corporation	Aug. 6–13	Wash., D.C.—Los Angeles—Cleveland	Y	Y	Y	4 Days
BIPARTISAN RETREAT / ASPEN INSTITUTE	MAR. 7-9, 1997	MORRISTOWN, NJ - HERSHEY, PA - MORRISTOWN, NJ	Y	Y	Y	N

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SCHEDULE VIII — POSITIONS

Report all positions, compensated or uncompensated, held during the current calendar year as an officer, director, trustee of an organization, partner, proprietor, representative, employee, or consultant of any corporation, firm, partnership, or other business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States.

Exclude: Positions held in any religious, social, fraternal, or political entities; positions solely of an honorary nature; and positions listed on Schedule I.

Position	Name of Organization
Member, Advisory Board	El Primer, LTD, Morristown, NJ

SCHEDULE IX — AGREEMENTS

Identify the date, parties to, and general terms of any agreement or arrangement with respect to: future employment; a leave of absence during the period of government service; continuation or deferral of payments by a former or current employer other than the U.S. Government; or continuing participation in an employee welfare or benefit plan maintained by a former employer.

Date	Parties To	Terms of Agreement
	NONE	

Use additional sheets if more space is required.

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(Office Use Only)

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1997

Form A
For use by Members, officers, and employees

Martin Frost
(Full Name)

2256 Rayburn House Office Building
(Mailing Address)

Washington DC 20515

Daytime Telephone: 202-225-3605

Filer Status	[X]	Member of the U.S House of Representatives	State: TX District: 24	[ ]	Officer or Employee	Employing Office
Report Type	[X]	Annual (May 15)	[ ] Amendment	[ ]	Termination	Termination Date

A $200 penalty shall be assessed against anyone who files more than 30 days late.

PRELIMINARY INFORMATION -- ANSWER EACH OF THESE QUESTIONS

I Did you or your spouse have "earned" income (e.g., salaries or fees) of $200 or more from any source in the reporting period? **If yes, complete and attach Schedule I.** Yes [X] No [ ]

II Did any individual or organization make a donation to charity in lieu of paying you for a speech, apppearance, or article in the reporting period? **If yes, complete and attach Schedule II.** Yes [X] No [ ]

III Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? **If yes, complete and attach Schedule III.** Yes [X] No [ ]

IV Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset worth more than $1,000 in the reporting period? **If yes, complete and attach Schedule IV.** Yes [X] No [ ]

V Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? **If yes, complete and attach Schedule V.** Yes [X] No [ ]

VI Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $250 and not otherwise exempt)? **If yes, complete and attach Schedule VI.** Yes [ ] No [X]

VII Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $250 from one source)? **If yes, complete and attach Schedule VII.** Yes [X] No [ ]

VIII Did you hold any reportable positions on or before the date of filing in the current calendar year? **If yes, complete and attach Schedule VIII.** Yes [X] No [ ]

IX Did you have any reportable agreement or arrangement with an outside entity? **If yes, complete and attach Schedule IX.** Yes [ ] No [X]

Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION -- ANSWER EACH OF THESE QUESTIONS

TRUSTS- Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child? (See Instructions, pages 10-11.) Yes [ ] No [X]

EXEMPTION Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption? (See Instructions, page 11.) Yes [ ] No [X]

CERTIFICATION -- THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended. The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct or its designee. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil penalties and criminal sanctions (See 5 U.S.C. app. 4, 104 and 18 U.S.C. 1001).

SIGNATURE OF REPORTING INDIVIDUAL: Mike Frost

DATE (Month/Day/Year): 4/30/98

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SCHEDULE I -- EARNED INCOME

List the source, type, and amount of earned income from any source (other than the filer's current employment by the U.S. Government) totalling $200 or more during the preceding calendar year. For a spouse, list the source and amount of any honoraria, list only the source for other spouse earned income exceeding $1,000. For further information, see Instructions, pages 12-13

	Source	Type	Amount
Examples:	Keene State	Approved Teaching Fee	$10,000
	State of Maryland	Legislative Pension	$9,000
	Civil War Roundtable (Oct. 2nd)	Spouse Speech	$1,000
	Ontario County Board of Education	Spouse Salary	NA
	Arlington County School District	Spouse Salary	$1,140.00

For payments to charity in lieu of honoraria, use Schedule II.

SCHEDULE II -- PAYMENTS IN LIEU OF HONORARIA MADE TO CHARITY

List the source, activity (i.e., speech, appearance, or article), date, and amount of any payment made by the sponsor of an event to a charitable organization in lieu of an honorarium. A separate confidential list of charities receiving such payments must be filed directly with the Committe on Standards of Official Conduct. An envelope for transmitting the list is included in each Member's filing package. For further information, see Instructions, pages 13-14.

Source	Activity	Date	Amount
Examples: Association of American Associations, Wash., D.C. XYZ Magazine	Speech Article	Feb. 2, 1994 Aug. 13, 1994	$2,000 $500
The Connell Company	Speech	Jan. 16, 1997	$2,000.00
Disabled American Veterans	Speech	May 27, 1997	$25.00

SCHEDULE III -- ASSETS AND "UNEARNED" INCOME

	BLOCK A **Asset and/or Income Source** Identify (a) each asset held for investment or production of income with a fair market value exceeding $1,000 at the end of the reporting year, and (b) any other asset or source of income which generated more than $200 in "unearned" income during the year. For rental property or land, provide an address. Provide full names of any mutual funds. For an IRA or retirement plan that is *self-directed*, list the underlying assets worth more than $1,000. For an IRA or retirement plan that is *not* self-directed, name the institution holding the account. **Exclude:** Your personal residence(s) (unless there is rental income); any debt owed to you by your spouse, or by your or your spouse's child, parent, or sibling; any deposits totalling $5,000 or less in personal savings accounts; any financial interests in or income derived from U.S. Government retirement programs. If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC) or is jointly held (JT), in the optional column on the far left. For further information, see Instructions, pages 14-20	BLOCK B **Value of Asset** at close of reporting year If you use a valuation method other than fair market value, please specify the method used If an asset was sold and is included only because it generated income, the value should be "None"	BLOCK C **Type of Income** If other than one of the listed categories, specify the type of income by writing a brief description in this block	BLOCK D **Amount of Income** For IRA's and retirement plans that are *not* self-directed, you may write in "NA" for income	BLOCK E **Transaction** Indicate if asset was purchased(P), sold(S), or exchanged(E) in reporting year
SP, DC, JT	*Examples:* SP — Mega Corp. Stock SP — 123 Main St., Dover, Del 1st Bank of Paducah, KY accounts	$15,001 - $50,000 $250,001 - $500,000 $50,001 - $100,000	Dividends Rent Interest	$201 - $1,000 $1,001 - $2,500 $5,001 - $15,000	P
	Central & Southwest Stock	$15,001 - $50,000	Dividends	$2,501 - $5,000	
	Eli Lily Stock	$50,001 - $100,000	Dividends	$201 - $1,000	
	Exxon Stock	$100,001 - $250,000	Dividends	$2,501 - $5,000	
	Houston Industries Stock	$15,001 - $50,000	Dividends	$1,001 - $2,500	
	EDS Stock	$1,001 - $15,000	Dividends	$1 - $200	
	Coca Cola Stock (IRA)	$1,001 - $15,000	Dividends	$1 - $200	
	Mattel Stock (IRA)	$1,001 - $15,000	Dividends	$1 - $200	NA
	Treasury CATS (IRA)	$1,001 - $15,000	Dividends	$1 - $200	NA

SCHEDULE III -- ASSETS AND "UNEARNED" INCOME

	Municipal Investment Trust Fund	$1,001 - $15,000	Dividends	$1 - $200	
SP	McDonald's Stock	$15,001 - $50,000	Dividends	$1 - $200	
SP	Walmart Stock	$1,001 - $15,000	Dividends	$1 - $200	
SP	WMX Stock	$1,001 - $15,000	Dividends	$1 - $200	
SP	Viacom Stock	$15,001 - $50,000	Dividends	$1 - $200	
SP	Treasury CATS (IRA)	$15,001 - $50,000	Interest	$1 - $200	
SP	Series E Bonds	$1,001 - $15,000	Interest	$1 - $200	
SP	Sara Lee Stock	$15,001 - $50,000	Dividends	$201 - $1,000	
SP	Staples Stock	$1,001 - $15,000	Dividends	$1 - $200	
SP	Coca Cola Stock	$1,001 - $15,000	Dividends	$1 - $200	
SP	Philip Morris Stock	$15,001 - $50,000	Dividends	$201 - $1,000	
SP	Telefones de Mexico	$1,001 - $15,000	Dividends	$1 - $200	
SP	Texaco Stock	$1,001 - $15,000	Dividends	$201 - $1,000	
SP	Pall Corp Stock	$1,001 - $15,000	Dividends	$1 - $200	
SP	NYNEX Stock	$1,001 - $15,000	Dividends	$1 - $200	
SP	Merck Stock	$1,001 - $15,000	Dividends	$1 - $200	
SP	Citizens Utilities Stock	$1,001 - $15,000	Dividends	$1 - $200	
SP	Pentech Stock	$1 - $1,000	Dividends	$1 - $200	
SP	AT&T Stock	$1,001 - $15,000	Dividends	$1 - $200	
SP	Lucent Technologies Stock	$1,001 - $15,000	Dividends	$1 - $200	
SP	Chevy Chase FSB	$1,001 - $15,000	Interest	$201 - $1,000	
SP	Motorola Stock	$1,001 - $15,000	Dividends	None	Gift

SCHEDULE III -- ASSETS AND "UNEARNED" INCOME

SP	Southwest Airlines Stock	$1,001 - $15,000	Dividends	None	Gift
DC	Treasury C.A.T.S.	$1,001 - $15,000	Interest	$201 - $1,000	S
DC	Coca Cola Stock	$1,001 - $15,000	Dividends	$1 - $200	
DC	McDonalds Stock	$1,001 - $15,000	Dividends	$1 - $200	
DC	Texaco Stock	$1,001 - $15,000	Dividends	$1 - $200	
DC	Bristol Myer s Squibb Stock	$1,001 - $15,000	Dividends	$1 - $200	
DC	Treasury C.A.T.S.	$15,001 - $50,000	Interest	$1,001 - $2,500	
DC	Coca Cola Stock	$1,001 - $15,000	Dividends	$1 - $200	
DC	General Electric Stock	$1,001 - $15,000	Dividends	$1 - $200	
DC	McDonalds Stock	$1,001 - $15,000	Dividends	$1 - $200	
DC	Sara Lee Stock	$1,001 - $15,000	Dividends	$1 - $200	
DC	Walmart Stock	$1,001 - $15,000	Dividends	$1 - $200	
DC	Walt Disney Stock	$1,001 - $15,000	Dividends	$1 - $200	
DC	AT&T Stock	$1,001 - $15,000	Dividends	$1 - $200	
DC	Bristol Myers Squibb Stock	$1,001 - $15,000	Dividends	$1 - $200	
DC	Texaco Stock	$1,001 - $15,000	Dividends	$1 - $200	
DC	Bond, MD. St. Health & Higher Educ.	$1,001 - $15,000	Interest	$1 - $200	
DC	Bond, Austin, TX, ISD	$1,001 - $15,000	Interest	$1 - $200	
DC	CBS Stock	$1,001 - $15,000	Dividends	$1 - $200	E
DC	Lucent Technologies Stock	$1,001 - $15,000	Dividends	$1 - $200	

SCHEDULE IV -- TRANSACTIONS

Report any purchase, sale, or exchange by you, your spouse, or dependent child during the reporting year of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child, or the purchase or sale of your personal residence, unless it is rented out. For further information, see Instructions, pages 20-21.

SP,DC,JT	Asset	Type of Transaction	Date	Amount of Transaction
	Example: Mega Corporation Common Stock	Purchase	10/12/94	$15,001 - $50,000
DC	AT&T Stock	Sold	4/7/97	$1,001 - $15,000
DC	Lucnet Technologies Stock	Sold	10/7/97	$1,001 - $15,000
DC	Westinghouse Stock	Sold	6/2/97	$1,001 - $15,000
DC	CBS Stock	Exchange	1997	$1,001 - $15,000
DC	Treasury CATS	Sold	1997	$1,001 - $15,000

SCHEDULE V -- LIABILITIES

Report liabilities of over $10,000 owed to any one creditor ***at any time*** during the reporting period by you, your spouse, or dependent child Mark the highest amount owed during the year
Exclude: Any mortgage on your personal residence (unless it is rented out); loans secured by automobiles, household furniture, or appliances, and liabilities owed to a spouse, or the child, parent, or sibling of you or your spouse Report ***revolving charge accounts*** only if the balance at the end of the reporting period exceeded $10,000 For further information, see Instructions, pages 21-22

SP,DC,JT	Creditor	Type of Liability	Amount of Liability
	Example First Bank of Wilmington, Delaware	Mortgage on 123 Main St , Dover, Del	$100,001 - $250,000
JT	Magnolia Mortgage Company	Mortgage on 2535 Wedglea	$15,001 - $50,000

SCHEDULE VII -- TRAVEL PAYMENTS AND REIMBURSEMENTS

Identify the source and list travel itinerary, dates, and nature of expenses provided for travel and travel-related expenses totalling more than $250 received by you, your spouse, or a dependent child during the reporting period. Indicate whether a family member accompanied the traveler at the sponsor's expense, and the amount of time, if any, that was not at the sponsor's expense. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor. **Exclude:** Travel-related expenses provided by federal, state and local governments, or by a foreign government required to be separately reported under the Foreign Gifts and Decorations Act (5 U.S.C. 7342); travel paid for by a Federal political committee; travel provided to a spouse or dependent child that is totally independent of his or her relationship to you. For further information, see Instructions, pages 24-26

Source	Date(s)	Point of Departure--Destination--Point of Return	Lodging? (Y/N)	Food? (Y/N)	Was a Family Member Included? (Y/N)	Any time not at sponsor's expense
Examples: Chicago Chamber of Commerce	Mar.2	Wash., D.C.-Chicago-Wash., D.C.	N	N	N	N
Mega Corporation	Aug.6-13	Wash., D.C.-Los Angeles-Cleveland	Y	Y	Y	4 Days
The Connell Company	01/16/97	DCA/NJ/DCA	N	N	N	None
Am. Israel Educ. Foundation	8/2/97 thru 8/10/97	DCA/JFK/Tel Aviv and return	Y	Y	Y	None

SCHEDULE VIII -- POSITIONS

Report all positions, compensated or uncompensated, held during the current calendar year as an officer, director, trustee of an organization, partner, proprietor, representative, employee, or consultant of any corporation, firm, partnership, or other business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States. For further information, see Instructions, page 26.

Exclude: Positions held in any religious, social, fraternal, or political entities, positions solely of an honorary nature, and positions listed on Schedule I.

Position	Organization
Board Member	World Craniofacial Foundation

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1997

FORM A
For use by Members, officers, and employees

98 MAY 15 PM 2:02

ELIZABETH FURSE
(Full Name)

316 CANNON BLDG
(Mailing Address)

Washington, D.C. ~~20003~~ 20515

Daytime Telephone 225-0855

HAND DELIVERED (5)
(Office Use Only)

Filer Status
- [X] Member of the U.S. House of Representatives — State OR, District 1
- [ ] Officer or Employee — Employing Office

Report Type
- [ ] Annual (May 15)
- [ ] Amendment
- [ ] Termination — Termination Date

A *$200 penalty* shall be assessed against anyone who files more than 30 days late.

PRELIMINARY INFORMATION — ANSWER EACH OF THESE QUESTIONS

I Did you or your spouse have "earned" income (e.g., salaries or fees) of $200 or more from any source in the reporting period? **If yes, complete and attach Schedule I.** — Yes [X] No [ ]

II Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? **If yes, complete and attach Schedule II.** — Yes [ ] No [X]

III Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? **If yes, complete and attach Schedule III.** — Yes [X] No [ ]

IV Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset worth more than $1,000 in the reporting period? **If yes, complete and attach Schedule IV.** — Yes [ ] No [X]

V Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? **If yes, complete and attach Schedule V.** — Yes [X] No [ ]

VI Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $250 and not otherwise exempt)? **If yes, complete and attach Schedule VI.** — Yes [ ] No [X]

VII Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $250 from one source)? **If yes, complete and attach Schedule VII.** — Yes [ ] No [X]

VIII Did you hold any reportable positions on or before the date of filing in the current calendar year? **If yes, complete and attach Schedule VIII.** — Yes [X] No [ ]

IX Did you have any reportable agreement or arrangement with an outside entity? **If yes, complete and attach Schedule IX.** — Yes [ ] No [X]

Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION — ANSWER EACH OF THESE QUESTIONS

TRUSTS—Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child? — Yes [ ] No [X]

EXEMPTION—Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption? — Yes [ ] No [X]

CERTIFICATION — THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended. The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct or its designee. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil penalties and criminal sanctions (*See* 5 U.S.C. app. 4, §104 and 18 U.S.C. §1001)

SIGNATURE OF REPORTING INDIVIDUAL: Elizabeth Furse

DATE (Month/Day/Year): 5/13/98

1346

Name Elizabeth Furse	Page 2 of 5

SCHEDULE I — EARNED INCOME

List the source, type, and amount of earned income from any source (other than the filer's current employment by the U.S. Government) totalling $200 or more during the preceding calendar year. For a spouse, list the source and amount of any honoraria; list only the source for other spouse earned income exceeding $1,000.

	Source	Type	Amount
Examples	Keene State	Approved Teaching Fee	$6,000
	State of Maryland	Legislative Pension	$9,000
	Civil War Roundtable (Oct 2nd)	Spouse Speech	$1,000
	Ontario County Board of Education	Spouse Salary	NA
	Columbia River Intertribal Fish Commission	spouse salary	NA

For payments to charity in lieu of honoraria, use Schedule II.

SCHEDULE III — ASSETS AND "UNEARNED" INCOME

Name *Elizabeth Furse* Page *3* of *5*

BLOCK A — Asset and/or Income Source

Identify (a) each asset held for investment or production of income with a fair market value exceeding $1,000 at the end of the reporting year, and (b) any other asset or source of in come which generated more than $200 in "unearned" income during the year. For rental property or land, provide an address. Provide full names of any mutual funds. For an IRA or retirement plan that is *self-directed*, list the underlying assets worth more than $1,000. For an IRA or retirement plan that is not selfdirected, name the institution holding the account.

Exclude: Your personal residence(s) (unless there is rental income), any debt owed to you by your spouse, or by your or your spouse's child, parent, or sibling; any deposits totalling $5,000 or less in personal savings accounts, any financial interests in or income derived from U.S. Government retirement programs.

If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC) or is jointly held (JT), in the optional column on the far left.

BLOCK B — Value of Asset

at close of reporting year. If you use a valuation method other than fair market value, please specify the method used. If an asset was sold and is included only because it generated income, the value should be "None."

Columns: A None; B $1 – $1,000; C $1,001 – $15,000; $15,001 – $50,000; E $50,001 – $100,000; F $100,001 – $250,000; G $250,001 – $500,000; H $500,001 – $1,000,000; I $1,000,001 – $5,000,000; J $5,000,001 – $25,000,000; K $25,000,001 – $50,000,000; L Over $50,000,000

BLOCK C — Type of Income

Columns: DIVIDENDS; RENT; INTEREST; CAPITAL GAINS; EXCEPTED TRUST; QUALIFIED BLIND TRUST; Other Type of Income (Specify For Example Partnership Income or Farm Income)

BLOCK D — Amount of Income

For IRA's and retirement plans that are *not* self-directed, you may write in "NA" for income.

Columns: I None; II $1 – $200; III $201 – $1,000; IV $1,001 – $2,500; V $2,501 – $5,000; VI $5,001 – $15,000; VII $15,001 – $50,000; VIII $50,001 – $100,000; IX $100,001 – $1,000,000; X $1,000,001 – $5,000,000; XI Over $5,000,000

BLOCK E — Transaction

Indicate if asset was purchased (P), sold (S), or exchanged (E) in reporting year. P, S, E

SP, DC, JT	Block A: Asset and/or Income Source	Block B: Value of Asset	Block C: Type of Income	Block D: Amount of Income	Block E: Transaction
SP (Examples)	Mega Corp Stock	X (E $50,001 – $100,000)	X (DIVIDENDS)	X (IV $1,001 – $2,500)	P
(Examples)	Simon & Schuster	Indefinite	Royalties	X (IX $100,001 – $1,000,000)	
(Examples)	1st Bank of Paducah, KY accounts	X (F $100,001 – $250,000)	X (INTEREST)	X (VI $5,001 – $15,000)	
JT	22485 N.W. YUNGEN HILLSBORO, OREGON	X (G $250,001 – $500,000)	grape production	X (VII $15,001 – $50,000)	
JT	22770 and 22790 N.W. YUNGEN HILLSBORO, OREGON	X (G $250,001 – $500,000)	grape production & winery	X (VI $5,001 – $15,000)	
JT	WINE INVENTORY	X (E $50,001 – $100,000)	sales	X (VI $5,001 – $15,000)	S(portion)

For additional assets and unearned income, use next page.

Note: Columbia Daily Income Account which was listed last year does not meet the reporting [illegible]

Name ELIZABETH FURSE | Page 4 of 5

SCHEDULE V — LIABILITIES

Report liabilities of over $10,000 owed to any one creditor ***at any time*** during the reporting period by you, your spouse, or dependent child. Mark the highest amount owed during the year. **Exclude:** Any mortgage on your personal residence (unless it is rented out); loans secured by automobiles, household furniture, or appliances; and liabilities owed to a spouse, or the child, parent, or sibling of you or your spouse. Report ***revolving charge accounts*** only if the balance at the end of the reporting period exceeded $10,000.

SP, DC, JT	Creditor	Type of Liability	Amount of Liability									
			B $10,001 – $15,000	C $15,001 – $50,000	D $50,001 – $100,000	E $100,001 – $250,000	F $250,001 – $500,000	G $500,001 – $1,000,000	H $1,000,001 – $5,000,000	I $5,000,001 – $25,000,000	J $25,000,001 – $50,000,000	K Over $50,000,000
Example:	First Bank of Wilmington, Delaware	Mortgage on 123 Main St., Dover, Del				X						
JT	FARM CREDIT SERVICE	mortgage on 22485, 22770 and 22790 N.W. YUNGEN, HILLSBORO, OR				X						
JT	SIDNEY BROWNELL, CAMBRIA, CA	secured demand note			X							

SCHEDULE VI — GIFTS

Report the source, a brief description, and the value of all gifts totalling more than $250 received by you, your spouse, or a dependent child from any source during the year

Exclude: Gifts from relatives, gifts of personal hospitality of an individual, local meals, and gifts to a spouse or dependent child that are totally independent of his or her relationship to you. Gifts with a value of $100 or less need not be added towards the $250 disclosure threshold

Note: The gift rule (House Rule 51) prohibits gifts except as specifically provided in the rule.

Source	Description	Value
Example: Mr. Joseph H. Smith, Anytown, Anystate	Silver Platter (determination on personal friendship received from Committee on Standards)	$270

Use additional sheets if more space is required.

SCHEDULE VIII — POSITIONS

Report all positions, compensated or uncompensated, held during the current calendar year as an officer, director, trustee of an organization, partner, proprietor, representative, employee, or consultant of any corporation, firm, partnership, or other business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States.

Exclude: Positions held in any religious, social, fraternal, or political entities; positions solely of an honorary nature; and positions listed on Schedule I.

Position	Name of Organization
ADVISORY CMTE. MEMBER	OREGON PEACE INSTITUTE (PORTLAND, OR)
BOARD of DIRECTORS (not paid)	CLEAN WATER FUND of the COLUMBIA RIVER BASIN (PORTLAND, OR)

SCHEDULE IX — AGREEMENTS

Identify the date, parties to, and general terms of any agreement or arrangement with respect to: future employment; a leave of absence during the period of government service; continuation or deferral of payments by a former or current employer other than the U.S. Government; or continuing participation in an employee welfare or benefit plan maintained by a former employer.

Date	Parties To	Terms of Agreement

GPO 1998 46-260 (mac)

Use additional sheets if more space is required.

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1997

FORM A
For use by Members, officers, and employees

RECEIVED
98 MAY -4 PM 1:01
OFFICE OF THE CLERK
HOUSE OF REPRESENTATIVES

APR 27 1998 (6)
(Office Use Only)

Elton Gallegly
(Full Name)

P. O. Box 3789
(Mailing Address)

Simi Valley, CA 93093

Daytime Telephone
805-522-4487

Filer Status
[XX] Member of the U.S. House of Representatives — State: _____ District: _____
[ ] Officer or Employee — Employing Office: _____

Report Type
[XX] Annual (May 15)
[ ] Amendment
[ ] Termination — Termination Date _____

A *$200 penalty* shall be assessed against anyone who files more than 30 days late.

PRELIMINARY INFORMATION — ANSWER EACH OF THESE QUESTIONS

I. Did you or your spouse have "earned" income (e.g., salaries or fees) of $200 or more from any source in the reporting period? **If yes, complete and attach Schedule I.** — Yes [XX] No [ ]

II. Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? **If yes, complete and attach Schedule II.** — Yes [ ] No [XX]

III. Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? **If yes, complete and attach Schedule III.** — Yes [XX] No [ ]

IV. Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset worth more than $1,000 in the reporting period? **If yes, complete and attach Schedule IV.** — Yes [XX] No [ ]

V. Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? **If yes, complete and attach Schedule V.** — Yes [XX] No [ ]

VI. Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $250 and not otherwise exempt)? **If yes, complete and attach Schedule VI.** — Yes [ ] No [XX]

VII. Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $250 from one source)? **If yes, complete and attach Schedule VII.** — Yes [ ] No [XX]

VIII. Did you hold any reportable positions on or before the date of filing in the current calendar year? **If yes, complete and attach Schedule VIII.** — Yes [ ] No [XX]

IX. Did you have any reportable agreement or arrangement with an outside entity? **If yes, complete and attach Schedule IX.** — Yes [ ] No [XX]

Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION — ANSWER EACH OF THESE QUESTIONS

TRUSTS—Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child? — Yes [ ] No [XX]

EXEMPTION—Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption? — Yes [ ] No [XX]

CERTIFICATION — THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended. The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct or its designee. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil penalties and criminal sanctions (*See* 5 U.S.C. app. 4, §104 and 18 U.S.C. §1001).

SIGNATURE OF REPORTING INDIVIDUAL _____ **DATE** (Month/Day/Year) 4/20/98

SCHEDULE I — EARNED INCOME

List the source, type, and amount of earned income from any source (other than the filer's current employment by the U.S. Government) totalling $200 or more during the preceding calendar year. For a spouse, list the source and amount of any honoraria; list only the source for other spouse earned income exceeding $1,000.

Source	Type	Amount
Examples: Keene State	Approved Teaching Fee	$6,000
State of Maryland	Legislative Pension	$9,000
Civil War Roundtable (Oct. 2nd)	Spouse Speech	$1,000
Ontario County Board of Education	Spouse Salary	NA
Dynamic Realty	Spouse salary	N/A

For payments to charity in lieu of honoraria, use Schedule II.

Name Elton Gallegly | Page 3 of 6

SCHEDULE III — ASSETS AND "UNEARNED" INCOME

BLOCK A — Asset and/or Income Source

Identify (a) each asset held for investment or production of income with a fair market value exceeding $1,000 at the end of the reporting year, and (b) any other asset or source of income which generated more than $200 in "unearned" income during the year. For rental property or land, provide an address. Provide full names of any mutual funds. For an IRA or retirement plan that is *self-directed*, list the underlying assets worth more than $1,000. For an IRA or retirement plan that is not selfdirected, name the institution holding the account.

Exclude: Your personal residence(s) (unless there is rental income); any debt owed to you by your spouse, or by your or your spouse's child, parent, or sibling; any deposits totalling $5,000 or less in personal savings accounts; any financial interests in or income derived from U.S. Government retirement programs.

If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC) or is jointly held (JT), in the optional column on the far left.

BLOCK B — Value of Asset

at close of reporting year.
If you use a valuation method other than fair market value, please specify the method used.
If an asset was sold and is included only because it generated income, the value should be "None."

BLOCK C — Type of Income

BLOCK D — Amount of Income

For IRA's and retirement plans that are *not* self-directed, you may write in "NA" for income.

BLOCK E — Transaction

Indicate if asset was purchased (P), sold (S), or exchanged (E) in reporting year.

	BLOCK A	BLOCK B												BLOCK C								BLOCK D											BLOCK E
		A	B	C	E	F	G	H	I	J	K	L																					
		None	$1 – $1,000	$1,001 – $15,000	$15,001 – $50,000	$50,001 – $100,000	$100,001 – $250,000	$250,001 – $500,000	$500,001 – $1,000,000	$1,000,001 – $5,000,000	$5,000,001 – $25,000,000	$25,000,001 – $50,000,000	Over $50,000,000	DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Type of Income (Specify: For Example, Partnership Income or Farm Income)	I None	II $1 – $200	III $201 – $1,000	IV $1,001 – $2,500	V $2,501 – $5,000	VI $5,001 – $15,000	VII $15,001 – $50,000	VIII $50,001 – $100,000	IX $100,001 – $1,000,000	X $1,000,001 – $5,000,000	XI Over $5,000,000	P, S, E
SP	.	SP	Mega Corp Stock																														
DC	*Examples*		Simon & Schuster		Indefinite																Royalties												P
JT			1st Bank of Paducah, KY accounts				X									X																	
JT	1791 Erringer Rd. Simi Valley, CA							X						X													X						
JT	1353 Agnew, Simi Valley						X							X												X							
SP	Dynamic Realty			X																	N/A												
JT	First Western Bank (formerly Simi Valley)				X											X							X										
JT	Peoples Bank (formerly So. Calif. Savings)					X										X										X							
	Cong. Federal Credit			X												X						X											

For additional assets and unearned income, use next page.

SCHEDULE III — ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Name: Elton Gallegly | Page 4 of 6

SP. DC. JT	BLOCK A Asset and/or Income Source	BLOCK B Year-End Value of Asset												BLOCK C Type of Income								BLOCK D Amount of Income											BLOCK E Transaction
		A None	B $1 – $1,000	C $1,001 – $15,000	D $15,001 – $50,000	E $50,001 – $100,000	F $100,001 – $250,000	G $250,001 – $500,000	H $500,001 – $1,000,000	I $1,000,001 – $5,000,000	J $5,000,001 – $25,000,000	K $25,000,001 – $50,000,000	L Over $50,000,000	DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Type of Income (Specify)	I None	II $1 – $200	III $201 – $1,000	IV $1,001 – $2,500	V $2,501 – $5,000	VI $5,001 – $15,000	VII $15,001 – $50,000	VIII $50,001 – $100,000	IX $100,001 – $1,000,000	X $1,000,001 – $5,000,000	XI Over $5,000,000	P, S, E
	Keough Wells Fargo (formerly Bank of A. Levy)			X																	N/A											
	IRA-Resources Trust RTC Cash Account		X																		N/A											
	IRA-Resources Trust Ventura Pacific Cap			X																	N/A											
	IRA-Resources Trust Rincon Pac Mgt					X															N/A											
	IRA-Resources Trust Meridian Ind. Trust				X																N/A											
SP	Fortis Global Growth			X																	N/A											P
SP	DLJSC - Amgen			X																	N/A											P
SP	DLJSC - CocaCola			X																	N/A											P
JT	Midland Property Ltd. Ptr XXIII who owns affordable housing at Central Ave. & Ventura Ct., Center, Colorado and who owns senior housing at 1615 "O" St, Sacramento, CA 95814				X											X					X											

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SCHEDULE IV — TRANSACTIONS

Name: Elton Gallegly

Report any purchase, sale, or exchange by you, your spouse, or dependent child during the reporting year of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child, or the purchase or sale of your personal residence, unless it is rented out.

SP, DC, JT	Asset	Type of Transaction: PURCHASE	SALE	EXCHANGE	Date (MO/DAY/YR)	Amount of Transaction: B ($1,001–$15,000)	C ($15,001–$50,000)	D ($50,001–$100,000)	E ($100,001–$250,000)	F ($250,001–$500,000)	G ($500,001–$1,000,000)	H ($1,000,001–$5,000,000)	I ($5,000,001–$25,000,000)	J ($25,000,001–$50,000,000)	K (Over $50,000,000)
SP	*Example:* Mega Corporation Common Stock	X			10-12-97		X								
SP	Fortis Advantage		X		1-24-97		X								
SP	Fortis Global Growth	X			1-24-97		X								
SP	Fortis Global Growth		X		5-28-97	X									
SP	DLJSC Amgen	X			5-28-97	X									
SP	Fortis Global Growth		X		5-30-97	X									
SP	DLJSC CocaCola	X			5-30-97	X									

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SCHEDULE V — LIABILITIES

Report liabilities of over $10,000 owed to any one creditor ***at any time*** during the reporting period by you, your spouse, or dependent child. Mark the highest amount owed during the year. **Exclude:** Any mortgage on your personal residence (unless it is rented out); loans secured by automobiles, household furniture, or appliances; and liabilities owed to a spouse, or the child, parent, or sibling of you or your spouse. Report ***revolving charge accounts*** only if the balance at the end of the reporting period exceeded $10,000.

SP, DC, JT	Creditor	Type of Liability	Amount of Liability									
			B $10,001 – $15,000	C $15,001 – $50,000	D $50,001 – $100,000	E $100,001 – $250,000	F $250,001 – $500,000	G $500,001 – $1,000,000	H $1,000,001 – $5,000,000	I $5,000,001 – $25,000,000	J $25,000,001 – $50,000,000	K Over $50,000,000
	Example First Bank of Wilmington, Delaware	Mortgage on 123 Main St., Dover, Del.				X						
JT	Mrs. Melissa Steinbergs 16065 Pinnacle Rd. Chino Hills, CA	Mortgage 1791 Erringer Simi Valley, CA				X						
JT	GMAC Mortgage P. O. Box 780, Waterloo, IA 50704	Mortgage 1353 Agnew St. Simi Valley, CA				X						

SCHEDULE VI — GIFTS

Report the source, a brief description, and the value of all gifts totalling more than $250 received by you, your spouse, or a dependent child from any source during the year.

Exclude: Gifts from relatives, gifts of personal hospitality of an individual, local meals, and gifts to a spouse or dependent child that are totally independent of his or her relationship to you. Gifts with a value of $100 or less need not be added towards the $250 disclosure threshold.

Note: The gift rule (House Rule 51) prohibits gifts except as specifically provided in the rule.

Source	Description	Value
Example: Mr. Joseph H. Smith, Anytown, Anystate	Silver Platter (determination on personal friendship received from Committee on Standards)	$270

Use additional sheets if more space is required.

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1997

FORM A
For use by Members, officers, and employees

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John Gregory GANSKE
(Full Name)

5206 Waterbury Rd, Des Moines, Iowa 50312
(Mailing Address) Daytime Telephone

515 277-4886

MC (Office Use Only)

(10)

Filer Status	[X] Member of the U.S. House of Representatives — State: ____ District ____	[ ] Officer or Employee — Employing Office: ____	**A *$200 penalty* shall be assessed against anyone who files more than 30 days late.**
Report Type	[X] Annual (May 15)	[ ] Amendment	[ ] Termination — Termination Date ____

PRELIMINARY INFORMATION — ANSWER EACH OF THESE QUESTIONS

I	Did you or your spouse have "earned" income (e.g., salaries or fees) of $200 or more from any source in the reporting period? **If yes, complete and attach Schedule I.**	Yes [X]	No [ ]	VI Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $250 and not otherwise exempt)? **If yes, complete and attach Schedule VI.**	Yes [ ] No [X]
II	Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? **If yes, complete and attach Schedule II.**	Yes [ ]	No [X]	VII Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $250 from one source)? **If yes, complete and attach Schedule VII.**	Yes [ ] No [X]
III	Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? **If yes, complete and attach Schedule III.**	Yes [X]	No [ ]	VIII Did you hold any reportable positions on or before the date of filing in the current calendar year? **If yes, complete and attach Schedule VIII.**	Yes [ ] No [X]
IV	Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset worth more than $1,000 in the reporting period? **If yes, complete and attach Schedule IV.**	Yes [X]	No [ ]	IX Did you have any reportable agreement or arrangement with an outside entity? **If yes, complete and attach Schedule IX.**	Yes [ ] No [X]
V	Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? **If yes, complete and attach Schedule V.**	Yes [X]	No [ ]	**Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.**	

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION — ANSWER EACH OF THESE QUESTIONS

TRUSTS—Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child?	Yes [ ]	No [X]
EXEMPTION—Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption?	Yes [ ]	No [X]

CERTIFICATION — THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended. The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct or its designee. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil penalties and criminal sanctions (*See* 5 U.S.C. app. 4, §104 and 18 U.S.C. §1001)

SIGNATURE OF REPORTING INDIVIDUAL Greg Ganske DATE (Month/Day/Year) 5/04/98

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SCHEDULE I — EARNED INCOME

List the source, type, and amount of earned income from any source (other than the filer's current employment by the U.S. Government) totalling $200 or more during the preceding calendar year. For a spouse, list the source and amount of any honoraria; list only the source for other spouse earned income exceeding $1,000.

	Source	Type	Amount
Examples	Keene State	Approved Teaching Fee	$6,000
	State of Maryland	Legislative Pension	$9,000
	Civil War Roundtable (Oct. 2nd)	Spouse Speech	$1,000
	Ontario County Board of Education	Spouse Salary	NA
	Corvine GANSKE, MD, Medical practice, Central		
	Iowa Hospital Corporation	Salary spouse	N.A

For payments to charity in lieu of honoraria, use Schedule II.

SCHEDULE II — PAYMENTS IN LIEU OF HONORARIA MADE TO CHARITY

List the source, activity (i.e., speech, appearance, or article), date, and amount of any payment made by the sponsor of an event to a charitable organization in lieu of an honorarium. A separate confidential list of charities receiving such payments must be filed directly with the Committee on Standards of Official Conduct. An envelope for transmitting the list is included in each Member's filing package.

Source	Activity	Date	Amount
Examples Association of American Associations, Wash., D.C.	Speech	Feb. 2, 1997	$2,000
XYZ Magazine	Article	Aug. 13, 1997	$500
NONE			

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Name John Gregory GANSKE | Page 4 of 10

SCHEDULE III — ASSETS AND "UNEARNED" INCOME

BLOCK A — Asset and/or Income Source

Identify (a) each asset held for investment or production of income with a fair market value exceeding $1,000 at the end of the reporting year, and (b) any other asset or source of income which generated more than $200 in "unearned" income during the year. For rental property or land, provide an address. Provide full names of any mutual funds. For an IRA or retirement plan that is *self-directed*, list the underlying assets worth more than $1,000. For an IRA or retirement plan that is not selfdirected, name the institution holding the account.

Exclude: Your personal residence(s) (unless there is rental income); any debt owed to you or your spouse, or by your or your spouse's child, parent, or sibling; any deposits totalling $1,000 or less in personal savings accounts; any financial interests in or income derived from U.S. Government retirement programs.

If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC) or is jointly held (JT), in the optional column on the far left.

BLOCK B — Value of Asset

at close of reporting year. If you use a valuation method other than fair market value, please specify the method used. If an asset was sold and is included only because it generated income, the value should be "None."

BLOCK C — Type of Income

BLOCK D — Amount of Income

For IRA's and retirement plans that are *not* self-directed, you may write in "NA" for income.

BLOCK E — Transaction

Indicate if asset was purchased (P), sold (S), or exchanged (E) in reporting year.

	BLOCK A		BLOCK B														BLOCK C							BLOCK D										BLOCK E
			A None	B $1 – $1,000	C $1,001 – $15,000		E $15,001 – $50,000	F $50,001 – $100,000	G $100,001 – $250,000	H $250,001 – $500,000	I $500,001 – $1,000,000	J $1,000,001 – $5,000,000	K $5,000, 001 – $25,000,000	L $25,000,001 – $50,000,000	Over $50,000,000		DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Type of Income (Specify. For Example, Partnership Income or Farm Income)	I None	II $1 – $200	III $201 – $1,000	IV $1,001 – $2,500	V $2,501 – $5,000	VI $5,001 – $15,000	VII $15,001 – $50,000	VIII $50,001 – $100,000	IX $100,001 – $1,000,000	X $1,000,001 – $5,000,000	XI Over $5,000,000	P, S, E
SP.	Examples:	SP	Mega Corp. Stock					X									X										X							P
DC.			Simon & Schuster		Indefinite																		Royalties											
JT			1st Bank of Paducah, KY accounts						X										X										X						
			J – Jive Corporation – Stock							X							X										X							
			Control Fund CDA LTD – stock						X								X								X										
			IRA Vanguard Windsor Fund				X										X			X						X									
			IRA Vanguard Index-500						X								X			X						X									
			Keogh – Sixty Twenty Fund						X								X			X									X						
			Keogh – [illegible] Shares Fund						X								X			X									X						

For additional assets and unearned income, use next page.

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SCHEDULE III — ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Name John Gregory GANSKE | Page 5 of 10

SP, DC, JT	BLOCK A: Asset and/or Income Source	BLOCK B: Year-End Value of Asset — A: None	B: $1 – $1,000	C: $1,001 – $15,000	D: $15,001 – $50,000	E: $50,001 – $100,000	F: $100,001 – $250,000	G: $250,001 – $500,000	H: $500,001 – $1,000,000	I: $1,000,001 – $5,000,000	J: $5,000,001 – $25,000,000	K: $25,000,001 – $50,000,000	L: Over $50,000,000	BLOCK C: Type of Income — DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Type of Income (Specify)	BLOCK D: Amount of Income — I: None	II: $1 – $200	III: $201 – $1,000	IV: $1,001 – $2,500	V: $2,501 – $5,000	VI: $5,001 – $15,000	VII: $15,001 – $50,000	VIII: $50,001 – $100,000	IX: $100,001 – $1,000,000	X: $1,000,001 – $5,000,000	XI: Over $5,000,000	BLOCK E: Transaction — P, S, E
	Fidelity Growth Fund						X							X			X								X							
	Dreyfus Liberal Govt Fund								X							X										X						
	Keogh – Vanguard Windsor II						X							X		X									X							
	Keogh – Schwab S&P 500					X								X		X									X							
	Keogh – Schwab Govt Money							X						X		X										X						
	Farmland, 156 acre Hamilton Co. Iowa							X												net farm income	X											
	Checking – Norwest			X												X								X								
	Fareway Stores Stock			X										X			X							X								
SP	Keogh – Schwab					X								X			X									X						
SP	IRA – Fidelity					X								X			X									X						
SP	IRA – Vanguard Windsor						X							X			X									X						
SP	IRA – Excelsior				X									X			X							X								
SP	Savings – Norwest						X									X								X								
SP	Checking – Norwest			X												X					X											
JC	Trust – Norwest – Common Stock Funds								X					X		X											X					

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SCHEDULE IV — TRANSACTIONS

Name John Gregory GANSKE | Page 1 of 10

SP, DC, JT	Asset	Type of Transaction: PURCHASE	SALE	EXCHANGE	Date: (MO/DAY/YR)	Amount of Transaction: B $1,001–$15,000	C $15,001–$50,000	D $50,001–$100,000	E $100,001–$250,000	F $250,001–$500,000	G $500,001–$1,000,000	H $1,000,001–$5,000,000	I $5,000,001–$25,000,000	J $25,000,001–$50,000,000	K Over $50,000,000
SP	*Example:* Mega Corporation Common Stock	X			10–12–97		X								
	Fidelity Growth Fund		X		5/15/97		X								
	[illegible] Govt Reserve	X			"		X								
	Fidelity Overseas Fund		X		5/15/97			X							
	[illegible] Govt Reserve	X			"			X							
	Vanguard Index 500		X		5/16/97				X						
	Alliance Gov Reserve	X			"				X						
	Vanguard S&P 500 Fund	X			10/28/97			X							
	Money Market Fund		X		"			X							
	[illegible] Corp.	X			10/16/97		X								
	Money Market Fund		X		"		X								
	Fidelity Growth	X			10/16/97		X								
	money market fund		X		"		X								
	Fidelity Overseas	X			10/16/97		X								
	Money Market Fund		X		"		X								
	Fidelity Ove[illegible]		X		11/28/97			X							
	Money Market Fund	X			"			X							

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SCHEDULE IV — TRANSACTIONS

Name John Gregory GANSKE | Page 2 of 10

Report any purchase, sale, or exchange by you, your spouse, or dependent child during the reporting year of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child, or the purchase or sale of your personal residence, unless it is rented out.			Type of Transaction			Date	Amount of Transaction									
			PURCHASE	SALE	EXCHANGE	(MO/DAY/YR)	B $1,001–$15,000	C $15,001–$50,000	D $50,001–$100,000	E $100,001–$250,000	F $250,001–$500,000	G $500,001–$1,000,000	H $1,000,001–$5,000,000	I $5,000,001–$25,000,000	J $25,000,001–$50,000,000	K Over $50,000,000
SP, DC, JT	Asset															
SP	*Example:*	Mega Corporation Common Stock	X			10–12–97		X								
	Fidelity Growth Fund			X		11/24/97		X								
	Money market fund		X			"		X								
!	Vanguard S&P 500 Index Fund			X		12/3/97		X								
	Money Market Fund		X			"		X								
	Vanguard S&P Index Fund			X		11/24/97		X								
	Money Market Fund (Dreyfus)		X			"		X								
	Fidelity Overseas Fund			X		1/9/98			X							
	Money Market Fund (Dreyfus)		X			"			X							
	Fidelity Growth Fund			X		1/9/98		X								
	Money Market Fund. (Dreyfus)		X			"		X								
	Vanguard S&P 500 Index			X		1/9/98		X								
	Money Market Fund (Dreyfus)		X			"		X								

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Name John Gregory GANSKE | Page 8 of 10

SCHEDULE V — LIABILITIES

Report liabilities of over $10,000 owed to any one creditor ***at any time*** during the reporting period by you, your spouse, or dependent child. Mark the highest amount owed during the year. **Exclude:** Any mortgage on your personal residence (unless it is rented out); loans secured by automobiles, household furniture, or appliances; and liabilities owed to a spouse, or the child, parent, or sibling of you or your spouse. Report ***revolving charge accounts*** only if the balance at the end of the reporting period exceeded $10,000.

SP, DC, JT	Creditor	Type of Liability	Amount of Liability										
			B $10,001 – $15,000	C $15,001 – $50,000	D $50,001 – $100,000	E $100,001 – $250,000	F $250,001 – $500,000	G $500,001 – $1,000,000	H $1,000,001 – $5,000,000	I $5,000,001 – $25,000,000	J $25,000,001 – $50,000,000	K Over $50,000,000
	Example: First Bank of Wilmington, Delaware	Mortgage on 123 Main St., Dover, Del.				X						
	Banker's Trust	personally guaranteed People For GANSKE loan					X					

SCHEDULE VI — GIFTS

Report the source, a brief description, and the value of all gifts totalling more than $250 received by you, your spouse, or a dependent child from any source during the year.

Exclude: Gifts from relatives, gifts of personal hospitality of an individual, local meals, and gifts to a spouse or dependent child that are totally independent of his or her relationship to you. Gifts with a value of $100 or less need not be added towards the $250 disclosure threshold.

Note: The gift rule (House Rule 51) prohibits gifts except as specifically provided in the rule.

Source	Description	Value
Example: Mr. Joseph H. Smith, Anytown, Anystate	Silver Platter (determination on personal friendship received from Committee on Standards)	$270
none		

Use additional sheets if more space is required.

Name John Gregory GANSKE | Page 9 of 10

SCHEDULE VII —TRAVEL PAYMENTS AND REIMBURSEMENTS

Identify the source and list travel itinerary, dates, and nature of expenses provided for travel and travel-related expenses totalling more than $250 received by you, your spouse, or a dependent child during the reporting period. Indicate whether a family member accompanied the traveler at the sponsor's expense, and the amount of time, if any, that was not at the sponsor's expense. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor.

Exclude: Travel-related expenses provided by federal, state, and local governments, or by a foreign government required to be separately reported under the Foreign Gifts and Decorations Act (5 U.S.C. § 7342); travel paid for by a Federal political committee; travel provided to a spouse or dependent child that is totally independent of his or her relationship to you.

Source		Date(s)	Point of Departure—Destination—Point of Return	Lodging? (Y/N)	Food? (Y/N)	Was a Family Member Included? (Y/N)	Any time not at sponsor's expense
Examples:	Chicago Chamber of Commerce	Mar. 2	Wash., D.C.—Chicago—Wash., D.C.	N	N	N	N
	Roycroft Corporation	Aug. 6–13	Wash., D.C.—Los Angeles—Cleveland	Y	Y	Y	4 Days
Idaho							

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SCHEDULE VIII — POSITIONS

Report all positions, compensated or uncompensated, held during the current calendar year as an officer, director, trustee of an organization, partner, proprietor, representative, employee, or consultant of any corporation, firm, partnership, or other business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States.

Exclude: Positions held in any religious, social, fraternal, or political entities; positions solely of an honorary nature; and positions listed on Schedule I.

Position	Name of Organization
None	

SCHEDULE IX — AGREEMENTS

Identify the date, parties to, and general terms of any agreement or arrangement with respect to: future employment; a leave of absence during the period of government service; continuation or deferral of payments by a former or current employer other than the U.S. Government; or continuing participation in an employee welfare or benefit plan maintained by a former employer.

Date	Parties To	Terms of Agreement
	None	

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UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1997

Form A
For use by Members, officers, and employees

Samuel Gejdenson
(Full Name)

1401 Longworth House Office Building
(Mailing Address)

Washington DC 20515

Daytime Telephone 202/225-2076

Filer Status	[X]	Member of the U S House of Representatives	State CT District 02	[ ]	Officer or Employee	Employing Office
Report Type	[X]	Annual (May 15)	[ ] Amendment	[ ]	Termination	Termination Date

A $200 penalty shall be assessed against anyone who files more than 30 days late.

PRELIMINARY INFORMATION -- ANSWER EACH OF THESE QUESTIONS

I Did you or your spouse have "earned" income (e g , salaries or fees) of $200 or more from any source in the reporting period? **If yes, complete and attach Schedule I.** Yes [X] No [ ]

II Did any individual or organization make a donation to charity in lieu of paying you for a speech, apppearance, or article in the reporting period? **If yes, complete and attach Schedule II.** Yes [ ] No [X]

III Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? **If yes, complete and attach Schedule III.** Yes [ ] No [X]

IV Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset worth more than $1,000 in the reporting period? **If yes, complete and attach Schedule IV.** Yes [ ] No [X]

V Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? **If yes, complete and attach Schedule V.** Yes [X] No [ ]

VI Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i e , aggregating more than $250 and not otherwise exempt)? **If yes, complete and attach Schedule VI.** Yes [ ] No [X]

VII Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $250 from one source)? **If yes, complete and attach Schedule VII.** Yes [ ] No [X]

VIII Did you hold any reportable positions on or before the date of filing in the current calendar year? **If yes, complete and attach Schedule VIII.** Yes [ ] No [X]

IX Did you have any reportable agreement or arrangement with an outside entity? **If yes, complete and attach Schedule IX.** Yes [ ] No [X]

Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION -- ANSWER EACH OF THESE QUESTIONS

TRUSTS- Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child? (See Instructions, pages 10-11) Yes [ ] No [X]

EXEMPTION Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption? (See Instructions, page 11) Yes [X] No [ ]

CERTIFICATION -- THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct or its designee Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil penalties and criminal sanctions (See 5 U S C app 4, 104 and 18 U S C 1001)

SIGNATURE OF REPORTING INDIVIDUAL

DATE (Month/Day/Year) 5/14/98

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SCHEDULE I -- EARNED INCOME

List the source, type, and amount of earned income from any source (other than the filer's current employment by the U.S. Government) totalling $200 or more during the preceding calendar year. For a spouse, list the source and amount of any honoraria, list only the source for other spouse earned income exceeding $1,000. For further information, see Instructions, pages 12-13

	Source	Type	Amount
Examples	Keene State	Approved Teaching Fee	$10,000
	State of Maryland	Legislative Pension	$9,000
	Civil War Roundtable (Oct 2nd)	Spouse Speech	$1,000
	Ontario County Board of Education	Spouse Salary	NA
	Joseph Cohn and Son, Inc.	Spouse Benefits	NA
	United Illuminating	Spouse Director's fees	NA
	Birmingham Utilities	Spouse Salary	NA
	Aristotle Corporation	Spouse Director's fees	NA

For payments to charity in lieu of honoraria, use Schedule II.

Name	Page 3 of 10

SCHEDULE II -- PAYMENTS IN LIEU OF HONORARIA MADE TO CHARITY

List the source, activity (i e , speech, appearance, or article), date, and amount of any payment made by the sponsor of an event to a charitable organization in lieu of an honorarium
A separate confidential list of charities receiving such payments must be filed directly with the Committe on Standards of Official Conduct An envelope for transmitting the list is included in each Member's filing package. For further information, see Instructions, pages 13-14

	Source	Activity	Date	Amount
Examples	Association of American Associations, Wash , D C	Speech	Feb 2, 1994	$2,000
	XYZ Magazine	Article	Aug 13, 1994	$500

SCHEDULE III -- ASSETS AND "UNEARNED" INCOME

BLOCK A **Asset and/or Income Source** Identify (a) each asset held for investment or production of income with a fair market value exceeding $1,000 at the end of the reporting year, and (b) any other asset or source of income which generated more than $200 in "unearned" income during the year. For rental property or land, provide an address. Provide full names of any mutual funds. For an IRA or retirement plan that is *self-directed*, list the underlying assets worth more than $1,000. For an IRA or retirement plan that is *not* self-directed, name the institution holding the account. **Exclude:** Your personal residence(s) (unless there is rental income); any debt owed to you by your spouse, or by your or your spouse's child, parent, or sibling; any deposits totalling $5,000 or less in personal savings accounts; any financial interests in or income derived from U.S. Government retirement programs. If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC) or is jointly held (JT), in the optional column on the far left For further information, see instructions, pages 14-20		BLOCK B **Value of Asset** at close of reporting year If you use a valuation method other than fair market value, please specify the method used If an asset was sold and is included only because it generated income, the value should be "None."	BLOCK C **Type of Income** If other than one of the listed categories, specify the type of income by writing a brief description in this block.	BLOCK D **Amount of Income** For IRA's and retirement plans that are *not* self-directed, you may write in "NA" for income	BLOCK E **Transaction** Indicate if asset was purchased(P), sold(S), or exchanged(E) in reporting year
SP DC JT	*Examples:* SP	Mega Corp. Stock 123 Main St., Dover, Del. 1st Bank of Paducah, KY accounts	$15,001 - $50,000 $250,001 - $500,000 $50,001 - $100,000	Dividends Rent Interest	$201 - $1,000 $1,001 - $2,500 $5,001 - $15,000	P

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SCHEDULE IV -- TRANSACTIONS

Report any purchase, sale, or exchange by you, your spouse, or dependent child during the reporting year of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child, or the purchase or sale of your personal residence, unless it is rented out. For further information, see Instructions, pages 20-21

SP,DC,JT	Asset	Type of Transaction	Date	Amount of Transaction
	Example: Mega Corporation Common Stock	Purchase	10/12/94	$15,001 - $50,000

SCHEDULE V -- LIABILITIES

Report liabilities of over $10,000 owed to any one creditor ***at any time*** during the reporting period by you, your spouse, or dependent child Mark the highest amount owed during the year
Exclude: Any mortgage on your personal residence (unless it is rented out), loans secured by automobiles, household furniture, or appliances, and liabilities owed to a spouse, or the child, parent, or sibling of you or your spouse Report ***revolving charge accounts*** only if the balance at the end of the reporting period exceeded $10,000 For further information, see Instructions, pages 21-22

SP,DC,JT	Creditor	Type of Liability	Amount of Liability
	Example First Bank of Wilmington, Delaware	Mortgage on 123 Main St , Dover, Del	$100,001 - $250,000
	Eastern Savings & Loan-- Norwich, CT	Line of Credit Comm Gejdenson Re-election	$50,001 - $100,000
	Eastern Savings & Loan-- Norwich, CT	Personal Loan	$15,001 - $50,000
	Mellon Mortgage Co	Mtge on 110 3rd St NE Washington, DC	$50,001 - $100,000
	Wright Patman Cong'l Federal Credit Union	Credit Overdraft	$15,001 - $50,000

SCHEDULE VI -- GIFTS

Report the source, a brief description, and the value of all gifts totalling more than $250 received by you, your spouse, or a dependent child from any source during the year

Exclude: Gifts from relatives, gifts of personal hospitality of an individual, local meals, and gifts to a spouse or dependent child that are totally independent of his or her relationship to you. Gifts with a value of $100 or less need not be added towards the $250 disclosure threshold.

Note: The gift rule (House Rule 52 in the 104th Congress, renumbered as House Rule 51 of the 105th Congress) prohibits gifts except as specifically provided in the rule.

For further information, see Instructions, pages 22-24.

Source	Description	Value
Example. Mr. Joseph H. Smith, Anytown, Anystate	Silver Platter (waiver received from Committee on Standards)	$270

SCHEDULE VII -- TRAVEL PAYMENTS AND REIMBURSEMENTS

Identify the source and list travel itinerary, dates, and nature of expenses provided for travel and travel-related expenses totalling more than $250 received by you, your spouse, or a dependent child during the reporting period. Indicate whether a family member accompanied the traveler at the sponsor's expense, and the amount of time, if any, that was not at the sponsor's expense. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor.
Exclude: Travel-related expenses provided by federal, state and local governments, or by a foreign government required to be separately reported under the Foreign Gifts and Decorations Act (5 U.S.C. 7342), travel paid for by a Federal political committee, travel provided to a spouse or dependent child that is totally independent of his or her relationship to you. For further information, see Instructions, pages 24-26.

	Source	Date(s)	Point of Departure--Destination--Point of Return	Lodging? (Y/N)	Food? (Y/N)	Was a Family Member Included? (Y/N)	Any time not at sponsor's expense
Examples	Chicago Chamber of Commerce	Mar 2	Wash., D.C.-Chicago-Wash., D.C.	N	N	N	N
	Mega Corporation	Aug 6-13	Wash., D.C.-Los Angeles-Cleveland	Y	Y	Y	4 Days
				N	N	N	

SCHEDULE VIII -- POSITIONS

Report all positions, compensated or uncompensated, held during the current calendar year as an officer, director, trustee of an organization, partner, proprietor, representative, employee, or consultant of any corporation, firm, partnership, or other business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States. For further information, see Instructions, page 26.

Exclude: Positions held in any religious, social, fraternal, or political entities, positions solely of an honorary nature, and positions listed on Schedule I.

Position	Organization

SCHEDULE IX -- AGREEMENTS

Identify the date, parties to, and general terms of any agreement or arrangement with respect to future employment, a leave of absence during the period of government service, continuation or deferral of payments by a former or current employer other than the U S Government, or continuing participation in an employee welfare or benefit plan maintained by a former employer. For further information, see Instructions, pages 26-27.

Date	Parties To	Terms of Agreement

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1997

FORM A

For use by Members, officers, and employees

RECEIVED
...LATIVE RESOURCE CE ...
98 MAY 18 PM 3:07
OFFICE OF THE CLERK
...HOUSE OF REPRESENTATIVE

GEORGE W. GEKAS
(Full Name)

732 South 25th Street
(Mailing Address)

HARRISBURG PA 17111

Daytime Telephone 202-225-4315

MAY 15 1998 (8)
(Office Use Only)

Filer Status	[X] Member of the U.S. House of Representatives	State PA District 17th	[ ] Officer or Employee	Employing Office	
Report Type	[X] Annual (May 15)	[ ] Amendment	[ ] Termination	Termination Date	

A *$200 penalty* shall be assessed against anyone who files more than 30 days late.

PRELIMINARY INFORMATION — ANSWER EACH OF THESE QUESTIONS

I Did you or your spouse have "earned" income (e.g., salaries or fees) of $200 or more from any source in the reporting period? **If yes, complete and attach Schedule I.** Yes [X] No [ ]

II Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? **If yes, complete and attach Schedule II** Yes [ ] No [X]

III Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? **If yes, complete and attach Schedule III.** Yes [X] No [ ]

IV Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset worth more than $1,000 in the reporting period? **If yes, complete and attach Schedule IV.** Yes [X] No [ ]

V Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? **If yes, complete and attach Schedule V.** Yes [X] No [ ]

VI Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $250 and not otherwise exempt)? **If yes, complete and attach Schedule VI.** Yes [ ] No [X]

VII Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $250 from one source)? **If yes, complete and attach Schedule VII.** Yes [X] No [ ]

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IX Did you have any reportable agreement or arrangement with an outside entity? **If yes, complete and attach Schedule IX.** Yes [ ] No [X]

Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION — ANSWER EACH OF THESE QUESTIONS

TRUSTS—Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child? Yes [ ] No [X]

EXEMPTION—Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption? Yes [ ] No [X]

CERTIFICATION — THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended. The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct or its designee. Any individual who knowingly and willfully falsifies or who knowingly and willfully fails to file this report may be subject to civil penalties and criminal sanctions (*See* 5 U.S.C. app. 4, §104 and 18 U.S.C. §1001)

SIGNATURE OF REPORTING INDIVIDUAL

DATE (Month/Day/Year) 5/15/98

1877

SCHEDULE I — EARNED INCOME

List the source, type, and amount of earned income from any source (other than the filer's current employment by the U.S. Government) totalling $200 or more during the preceding calendar year. For a spouse, list the source and amount of any honoraria; list only the source for other spouse earned income exceeding $1,000

Source		Type	Amount
Examples	Keene State	Approved Teaching Fee	$6,000
	State of Maryland	Legislative Pension	$9,000
	Civil War Roundtable (Oct 2nd)	Spouse Speech	$1,000
	Ontario County Board of Education	Spouse Salary	NA
GORDON D MYERS, M.D.		SPOUSE SALARY	NA
COMMONWEALTH OF PENNSYLVANIA STATE EMPLOYES' RETIREMENT SYSTEM		LEGISLATIVE PENSION	* 15,128

For payments to charity in lieu of honoraria, use Schedule II.

Name George W. Green | Page 3 of 8

SCHEDULE III — ASSETS AND "UNEARNED" INCOME

BLOCK A — Asset and/or Income Source

Identify (a) each asset held for investment or production of income with a fair market value exceeding $1,000 at the end of the reporting year, and (b) any other asset or source of income which generated more than $200 in "unearned" income during the year. For rental property or land, provide an address. Provide full names of any mutual funds. For an IRA or retirement plan that is *self-directed*, list the underlying assets worth more than $1,000. For an IRA or retirement plan that is not self-directed, name the institution holding the account.

Exclude: Your personal residence(s) (unless there is rental income), any debt owed to you by your spouse, or by your or your spouse's child, parent, or sibling, any deposits totalling $5,000 or less in personal savings accounts, any financial interests in or income derived from U.S. Government retirement programs.

If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC) or is jointly held (JT), in the optional column on the far left.

SP.	SP	Mega Corp. Stock
DC.	*Examples*	Simon & Schuster
JT		1st Bank of Paducah, KY accounts

BLOCK B — Value of Asset

at close of reporting year.

If you use a valuation method other than fair market value, please specify the method used. If an asset was sold and is included only because it generated income, the value should be "None."

	None	A	B	C	D	E	F	G	H	I	J	K	L
		$1 – $1,000	$1,001 – $15,000	$15,001 – $50,000	$50,001 – $100,000	$100,001 – $250,000	$250,001 – $500,000	$500,001 – $1,000,000	$1,000,001 – $5,000,000	$5,000,001 – $25,000,000	$25,000,001 – $50,000,000	Over $50,000,000
Mega Corp. Stock				X								
Simon & Schuster				Indefinite								
1st Bank of Paducah, KY accounts							X					
Bank of Bedford, PA (IRA)					X							
Pharmacy Services (IRA)												
New Penn Bank (see below A)												
Diversified Investment							X					
Mutual Insurance Fraternal (IRA)			X									
Bedford Bank					X							
Bedford Bank												
Mid Penn Bank						X						
Millersburg PA												

BLOCK C — Type of Income

	DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Type of Income (Specify. For Example: Partnership Income or Farm Income)
Bank of Bedford, PA (IRA)	X		X				
Pharmacy Services (IRA)				X			
New Penn Bank (see below A)	X						
Diversified Investment			X				
Mutual Insurance Fraternal (IRA)				X			
Bedford Bank			X				
Bedford Bank							
Mid Penn Bank			X				
Millersburg PA							Royalties

BLOCK D — Amount of Income

For IRA's and retirement plans that are *not* self-directed, you may write in "NA" for income.

	None	I	II	III	IV	V	VI	VII	VIII	IX	X	XI
			$1 – $200	$201 – $1,000	$1,001 – $2,500	$2,501 – $5,000	$5,001 – $15,000	$15,001 – $50,000	$50,001 – $100,000	$100,001 – $1,000,000	$1,000,001 – $5,000,000	Over $5,000,000
Mega Corp. Stock												
Simon & Schuster					X							
1st Bank of Paducah, KY accounts							X					
Bank of Bedford, PA (IRA)	X											
Pharmacy Services (IRA)												
New Penn Bank (see below A)												
Diversified Investment												
Mutual Insurance Fraternal (IRA)												
Bedford Bank			X									
Bedford Bank					X							
Mid Penn Bank						X						
Millersburg PA												

BLOCK E — Transaction

Indicate if asset was purchased (P), sold (S), or exchanged (E) in reporting year.

	I – P, S, E
Bank of Bedford, PA (IRA)	P
Pharmacy Services (IRA)	
New Penn Bank (see below A)	P
Diversified Investment	
Mutual Insurance Fraternal (IRA)	
Bedford Bank	P
Bedford Bank	
Mid Penn Bank	
Millersburg PA	

NA - IRA

NA - IRA

For additional assets and unearned income, use next page.

SCHEDULE III — ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Name George W. Geras | Page 4 of 8

SP DC JT	BLOCK A Asset and/or Income Source	BLOCK B Year-End Value of Asset											BLOCK C Type of Income							BLOCK D Amount of Income										BLOCK E Transaction
		A None	B $1 – $1,000	C $1,001 – $15,000	D $15,001 – $50,000	E $50,001 – $100,000	F $100,001 – $250,000	G $250,001 – $500,000	H $500,001 – $1,000,000	I $1,000,001 – $5,000,000	J $5,000,001 – $25,000,000	K $25,000,001 – $50,000,000	L Over $50,000,000	DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Type of Income (Specify)	I None	II $1 – $200	III $201 – $1,000	IV $1,001 – $2,500	V $2,501 – $5,000	VI $5,001 – $15,000	VII $15,001 – $50,000	VIII $50,001 – $100,000	IX $100,001 – $1,000,000	X $1,000,001 – $5,000,000	XI Over $5,000,000	P, S, E
	HARRIS SAVING ASSOCIATION HARRISBURG, PA					X										X					X				X					
	US Savings Bonds "EE"						X									X					X									
	INVESCO Funds Group Inc. DENVER, CO			X										X			X						X							
JT	PNC BANK CAMP HILL PA		X													X						X	X							
	MERIDIAN BANK READING PA		X													X						X								
SP	Daughtry Deposit Bank HARRISBURG PA			X												X														
SP	US Savings Bonds "E"			X												X					X									
SP	124 Bobs Street HARRISBURG, PA					X								X											X					
SP	INTEREST IN ESTATE OF LOUIS CHARLES (See Sch. A)						X												None		X									
SJ	COMMERCE BANK CAMP HILL PA		X													X					X									

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Name GEORGE W. GEHAS | Page 5 of 8

SCHEDULE IV — TRANSACTIONS

Report any purchase, sale, or exchange by you, your spouse, or dependent child during the reporting year of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child, or the purchase or sale of your personal residence, unless it is rented out.

SP, DC, JT	Asset	Type of Transaction: PURCHASE	SALE	EXCHANGE	Date (MO/DAY/YR)	Amount of Transaction: B $1,001–$15,000	C $15,001–$50,000	D $50,001–$100,000	E $100,001–$250,000	F $250,001–$500,000	G $500,001–$1,000,000	H $1,000,001–$5,000,000	I $5,000,001–$25,000,000	J $25,000,001–$50,000,000	K Over $50,000,000
SP	*Example:* Mega Corporation Common Stock	X			10-12-97		X								
	Dauphin Deposit Bank (IRA)	X			4.14.97	X									
SP	Prudential Securities (IRA)														
	AIM Equity Funds, Inc. Charter Fund	X			12.22.97	X									
	Phoenix Balanced Funds	X			12.22.97	X									
	Prudential Multi Sector Fund : Class A	X			12.22.97	X									
	AIM Equity Funds, Inc. Constellation Fund	X			12.22.97	X									

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SCHEDULE V — LIABILITIES

Report liabilities of over $10,000 owed to any one creditor ***at any time*** during the reporting period by you, your spouse, or dependent child. Mark the highest amount owed during the year. **Exclude:** Any mortgage on your personal residence (unless it is rented out), loans secured by automobiles, household furniture, or appliances, and liabilities owed to a spouse, or the child, parent, or sibling of you or your spouse. Report ***revolving charge accounts*** only if the balance at the end of the reporting period exceeded $10,000.

SP, DC, JT	Creditor	Type of Liability	Amount of Liability									
			B $10,001 – $15,000	C $15,001 – $50,000	D $50,001 – $100,000	E $100,001 – $250,000	F $250,001 – $500,000	G $500,001 – $1,000,000	H $1,000,001 – $5,000,000	I $5,000,001 – $25,000,000	J $25,000,001 – $50,000,000	K Over $50,000,000
Example	First Bank of Wilmington, Delaware	Mortgage on 123 Main St., Dover, Del				X						
JT	Dauphin National Bank, Harrisburg, PA	Blanket Mortgage on 732 S. 25th St, Hbg, PA										
	}	313 S. 31st St, Hbg, PA			X							
		124 Boas St, Hbg, PA										

SCHEDULE VI — GIFTS

Report the source, a brief description, and the value of all gifts totalling more than $250 received by you, your spouse, or a dependent child from any source during the year.

Exclude: Gifts from relatives, gifts of personal hospitality of an individual, local meals, and gifts to a spouse or dependent child that are totally independent of his or her relationship to you. Gifts with a value of $100 or less need not be added towards the $250 disclosure threshold.

Note: The gift rule (House Rule 51) prohibits gifts except as specifically provided in the rule.

Source	Description	Value
Example Mr. Joseph H. Smith, Anytown, Anystate	Silver Platter (determination on personal friendship received from Committee on Standards)	$270
None		

Use additional sheets if more space is required.

Name GEORGE W. GEKAS | Page 7 of 8

SCHEDULE VII —TRAVEL PAYMENTS AND REIMBURSEMENTS

Identify the source and list travel itinerary, dates, and nature of expenses provided for travel and travel-related expenses totalling more than $250 received by you, your spouse, or a dependent child during the reporting period. Indicate whether a family member accompanied the traveler at the sponsor's expense, and the amount of time, if any, that was not at the sponsor's expense. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor.

Exclude: Travel-related expenses provided by federal, state, and local governments, or by a foreign government required to be separately reported under the Foreign Gifts and Decorations Act (5 U.S.C. § 7342); travel paid for by a Federal political committee; travel provided to a spouse or dependent child that is totally independent of his or her relationship to you.

Source	Date(s)	Point of Departure—Destination—Point of Return	Lodging? (Y/N)	Food? (Y/N)	Was a Family Member Included? (Y/N)	Any time not at sponsor's expense
Examples: Chicago Chamber of Commerce	Mar. 2	Wash., D.C.—Chicago—Wash., D.C.	N	N	N	N
Roycroft Corporation	Aug. 6–13	Wash., D.C.—Los Angeles—Cleveland	Y	Y	Y	4 Days
ASPEN INSTITUTE	MAR 7-9	HARRISBURG, PA - HERSHEY, PA - HARRISBURG, PA (B)	N(A)	Y(A)	N	N (A)
(A) CONGRESSMAN GEKAS STAYED OVERNIGHT AND CONSIDERS SOME MEALS DURING THIS TIME PERIOD AT HIS HARRISBURG, PA RESIDENCE						
(B) PURPOSE OF TRAVEL-RELATED EXPENSES WAS PARTICIPATION IN THE BIPARTISAN RETREAT						

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EXHIBIT A

Schedule III - Assets
Prudential Securities - Spouse - IRA

Assets related to the IRA account on December 31, 1997

	Value
AIM Equity Funds Incorporated - Charter Fund	$50,001 - $100,000
AIM Equity Funds Incorporated - Constellation Fund	$15,001 - $ 50,000
Phoenix Balanced Fund	$15,001 - $ 50,000
Prudential Multi Sector Fund: Class A	$15,001 - $ 50,000
Cash	$ 1,001 - $ 15,000

EXHIBIT B

Schedule III - Assets
Interest in Estate of Louis Charas - Assets within the Estate

	Value
732 S. 25th Street, Harrisburg, PA - House	$50,001 - $100,000
313 S. 31st Street, Harrisburg, PA - House	$50,001 - $100,000

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1997

FORM A

For use by Members, officers, and employees

98 MAY 15 PM 1:03

Richard A. Gephardt
(Full Name)

H-204 The Capitol
(Mailing Address)

Washington, DC 20512

Daytime Telephone (202) 225-0100

MC (8)

HAND-DELIVERED

Filer Status	[X] Member of the U.S. House of Representatives	State MO	District 03	[ ] Officer or Employee	Employing Office	A *$200 penalty* shall be assessed against anyone who files more than 30 days late.
Report Type	[ ] Annual (May 15)	[ ] Amendment		[ ] Termination	Termination Date	

PRELIMINARY INFORMATION — ANSWER EACH OF THESE QUESTIONS

I. Did you or your spouse have "earned" income (e.g., salaries or fees) of $200 or more from any source in the reporting period? **If yes, complete and attach Schedule I.** Yes [X] No [ ]

II. Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? **If yes, complete and attach Schedule II** Yes [X] No [ ]

III. Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? **If yes, complete and attach Schedule III** Yes [X] No [ ]

IV. Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset worth more than $1,000 in the reporting period? **If yes, complete and attach Schedule IV.** Yes [X] No [ ]

V. Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? **If yes, complete and attach Schedule V.** Yes [X] No [ ]

VI. Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $250 and not otherwise exempt)? **If yes, complete and attach Schedule VI** Yes [ ] No [X]

VII. Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $250 from one source)? **If yes, complete and attach Schedule VII.** Yes [X] No [ ]

VIII. Did you hold any reportable positions on or before the date of filing in the current calendar year? **If yes, complete and attach Schedule VIII** Yes [X] No [ ]

IX. Did you have any reportable agreement or arrangement with an outside entity? **If yes, complete and attach Schedule IX** Yes [ ] No [X]

Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION — ANSWER EACH OF THESE QUESTIONS

TRUSTS—Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child? Yes [ ] No [X]

EXEMPTION—Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption? Yes [ ] No [X]

CERTIFICATION — THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended. The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct or its designee. Any individual who knowingly and willfully falsifies or who knowingly and willfully fails to file this report may be subject to civil penalties and criminal sanctions (*See* 5 U.S.C. app. 4, §104 and 18 U.S.C. §1001)

SIGNATURE OF REPORTING INDIVIDUAL Richard A. Gephardt

DATE (Month/Day/Year) 5/15/98

1385

SCHEDULE I — EARNED INCOME

List the source, type, and amount of earned income from any source (other than the filer's current employment by the U.S. Government) totalling $200 or more during the preceding calendar year. For a spouse, list the source and amount of any honoraria; list only the source for other spouse earned income exceeding $1,000

Source	Type	Amount
Examples Keene State	Approved Teaching Fee	$[illegible]
State of Maryland	Legislative Pension	$4,000
Civil War Roundtable (Oct. 2nd)	Spouse Speech	$1,000
Ontario County Board of Education	Spouse Salary	N/A
Northern Virginia Medical Association	Spouse Salary	N/A

For payments to charity in lieu of honoraria, use Schedule II.

SCHEDULE II — PAYMENTS IN LIEU OF HONORARIA MADE TO CHARITY

List the source, activity (i e., speech, appearance, or article), date, and amount of any payment made by the sponsor of an event to a charitable organization in lieu of an honorarium. A separate confidential list of charities receiving such payments must be filed directly with the Committee on Standards of Official Conduct. An envelope for transmitting the list is included in each Member's filing package.

Source	Activity	Date	Amount
Examples Association of American Associations, Wash , D C XYZ Magazine	Speech Article	Feb 2, 1997 Aug 13, 1997	$2,000 $500
St. Louis University	Speech	Mar. 24, 1997	$1,000.00

This page may be copied if more space is required.

SCHEDULE III — ASSETS AND "UNEARNED" INCOME

Name: Richard A. Gephardt

BLOCK A — Asset and/or Income Source

Identify (a) each asset held for investment or production of income with a fair market value exceeding $1,000 at the end of the reporting year, and (b) any other asset or source of income which generated more than $200 in "unearned" income during the year. For rental property or land, provide an address. Provide full names of any mutual funds. For an IRA or retirement plan that is *self-directed*, list the underlying assets worth more than $1,000. For an IRA or retirement plan that is not selfdirected, name the institution holding the account.

Exclude: Your personal residence(s) (unless there is rental income), any debt owed to you by your spouse, or by your or your spouse's child, parent, or sibling, any deposits totalling $5,000 or less in personal savings accounts, any financial interests in or income derived from U.S. Government retirement programs.

If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC) or is jointly held (JT), in the optional column on the far left.

BLOCK B — Value of Asset (at close of reporting year. If you use a valuation method other than fair market value, please specify the method used. If an asset was sold and is included only because it generated income, the value should be "None.")

BLOCK C — Type of Income

BLOCK D — Amount of Income (For IRA's and retirement plans that are *not* self-directed, you may write in "NA" for income)

BLOCK E — Transaction (Indicate if asset was purchased (P), sold (S), or exchanged (E) in reporting year.)

	BLOCK A	B	C	E	F	G	H	I	J	K	L	BLOCK C								I	II	III	IV	V	VI	VII	VIII	IX	X	XI	BLOCK E
		A None	$1 – $1,000	$1,001 – $15,000	$15,001 – $50,000	$50,001 – $100,000	$100,001 – $250,000	$250,001 – $500,000	$500,001 – $1,000,000	$1,000,001 – $5,000,000	$5,000,001 – $25,000,000	$25,000,001 – $50,000,000	Over $50,000,000	DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Type of Income (Specify. For Example: Partnership Income or Farm Income)	None	$1 – $200	$201 – $1,000	$1,001 – $2,500	$2,501 – $5,000	$5,001 – $15,000	$15,001 – $50,000	$50,001 – $100,000	$100,001 – $1,000,000	$1,000,001 – $5,000,000	Over $5,000,000	P, S, E
SP						X								X						Royalties				X			X				P
DC	*Examples*		Indefinite													X															
JT						X																				X					
SP	Mega Corp Stock				X																										
JT	Simon & Schuster																														
JT	1st Bank of Paducah, KY accounts																														
JT	Fidelity Funds: Growth & Income/New Millenium		X											X			X				X										S

For additional assets and unearned income, use next page.

1988

SCHEDULE IV — TRANSACTIONS

Name Richard A. Gephardt | Page 5 of 8

Report any purchase, sale, or exchange by you, your spouse, or dependent child during the reporting year of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child, or the purchase or sale of your personal residence, unless it is rented out

SP, DC, JT	Asset	Type of Transaction: PURCHASE	SALE	EXCHANGE	Date (MO/DAY/YR)	Amount of Transaction: B ($1,001–$15,000)	C ($15,001–$50,000)	D ($50,001–$100,000)	E ($100,001–$250,000)	F ($250,001–$500,000)	G ($500,001–$1,000,000)	H ($1,000,001–$5,000,000)	I ($5,000,001–$25,000,000)	J ($25,000,001–$50,000,000)	K (Over $50,000,000)
SP	*Example* Mega Corporation Common Stock	X			10–12–97		X								
JT	Fidelity Funds		X		3–31–97		X								

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SCHEDULE V — LIABILITIES

Report liabilities of over $10,000 owed to any one creditor ***at any time*** during the reporting period by you, your spouse, or dependent child. Mark the highest amount owed during the year. **Exclude:** Any mortgage on your personal residence (unless it is rented out), loans secured by automobiles, household furniture, or appliances, and liabilities owed to a spouse, or the child, parent, or sibling of you or your spouse. Report ***revolving charge accounts*** only if the balance at the end of the reporting period exceeded $10,000.

SP, DC, JT	Creditor	Type of Liability	Amount of Liability									
			B $10,001–$15,000	C $15,001–$50,000	D $50,001–$100,000	E $100,001–$250,000	F $250,001–$500,000	G $500,001–$1,000,000	H $1,000,001–$5,000,000	I $5,000,001–$25,000,000	J $25,000,001–$50,000,000	K Over $50,000,000
	Example First Bank of Wilmington, Delaware	Mortgage on 123 Main St., Dover, Del				X						
JT	Northwestern University	Student Loan		X								
JT	First Tennessee Bank	Student Loan		X								
JT	General American Life Insurance Co.	Loan on Life Insurance Policy		X								

SCHEDULE VI — GIFTS

Report the source, a brief description, and the value of all gifts totalling more than $250 received by you, your spouse, or a dependent child from any source during the year.

Exclude: Gifts from relatives, gifts of personal hospitality of an individual, local meals, and gifts to a spouse or dependent child that are totally independent of his or her relationship to you. Gifts with a value of $100 or less need not be added towards the $250 disclosure threshold.

Note: The gift rule (House Rule 51) prohibits gifts except as specifically provided in the rule.

Source	Description	Value
Example Mr. Joseph H. Smith, Anytown, Anystate	Silver Platter (determination on personal friendship received from Committee on Standards)	$270
None		

Use additional sheets if more space is required.

1990

SCHEDULE VII —TRAVEL PAYMENTS AND REIMBURSEMENTS

Identify the source and list travel itinerary, dates, and nature of expenses provided for travel and travel-related expenses totalling more than $250 received by you, your spouse, or a dependent child during the reporting period. Indicate whether a family member accompanied the traveler at the sponsor's expense, and the amount of time, if any, that was not at the sponsor's expense. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor.

Exclude: Travel-related expenses provided by federal, state, and local governments, or by a foreign government required to be separately reported under the Foreign Gifts and Decorations Act (5 U.S.C. § 7342); travel paid for by a Federal political committee; travel provided to a spouse or dependent child that is totally independent of his or her relationship to you.

Source	Date(s)	Point of Departure—Destination—Point of Return	Lodging? (Y/N)	Food? (Y/N)	Was a Family Member Included? (Y/N)	Any time not at sponsor's expense
Examples						
Chicago Chamber of Commerce	Mar 2	Wash., D.C.—Chicago—Wash., D.C.	N	N	N	N
Roycroft Corporation	Aug 6-13	Wash., D.C.—Los Angeles—Cleveland	Y	Y	Y	4 Days
AFL-CIO	2/16-19/97	Washington, DC-Los Angeles	Y	Y	Y	N
Aspen Institute	3/7-9/97	Wash,DC-Hershey,PA-Wash,DC	Y	Y	Y	N
North Carolina State University Emerging Issues Forum	4/11/97	Wash,DC - Raleigh - Wash,DC	N	N	N	N
Weizman Institute	9/14/97	Washington,DC - Chicago	Y	Y	N	N
University of Massachusetts (Boston)	10/27-28/97	St. Louis-Boston-Wash,DC	Y	Y	N	N

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SCHEDULE VIII — POSITIONS

Report all positions, compensated or uncompensated, held during the current calendar year as an officer, director, trustee of an organization, partner, proprietor, representative, employee, or consultant of any corporation, firm, partnership, or other business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States

Exclude: Positions held in any religious, social, fraternal, or political entities, positions solely of an honorary nature, and positions listed on Schedule I

Position	Name of Organization
Institute Board	Public Policy School, Duke University (uncompensated)

SCHEDULE IX — AGREEMENTS

Identify the date, parties to, and general terms of any agreement or arrangement with respect to: future employment, a leave of absence during the period of government service; continuation or deferral of payments by a former or current employer other than the U.S. Government, or continuing participation in an employee welfare or benefit plan maintained by a former employer.

Date	Parties To	Terms of Agreement
	None	

GPO 1998 46-260 (mac)

Use additional sheets if more space is required.

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1997

FORM A
For use by Members, officers, and employees

RECEIVED
LEGISLATIVE RESOURCE CENTER
98 MAY 15 AM 11:54
OFFICE OF THE CLERK
U.S. HOUSE OF REPRESENTATIVES
MAY 11 1998
(Office Use Only)

(6)

James Arthur Gibbons
(Full Name)

2535 Kinney Lane
(Mailing Address)

Reno, NV 89511

Daytime Telephone: 702-851-4266

Filer Status	[X]	Member of the U.S. House of Representatives	State Nevada District 2	[ ] Officer or Employee	Employing Office
Report Type	[X]	Annual (May 15)	[ ] Amendment	[ ] Termination	Termination Date

A *$200 penalty* shall be assessed against anyone who files more than 30 days late.

PRELIMINARY INFORMATION — ANSWER EACH OF THESE QUESTIONS

I. Did you or your spouse have "earned" income (e.g., salaries or fees) of $200 or more from any source in the reporting period?
If yes, complete and attach Schedule I. — Yes [X] No [ ]

II. Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period?
If yes, complete and attach Schedule II. — Yes [ ] No [X]

III. Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period?
If yes, complete and attach Schedule III — Yes [X] No [ ]

IV. Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset worth more than $1,000 in the reporting period?
If yes, complete and attach Schedule IV — Yes [X] No [ ]

V. Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period?
If yes, complete and attach Schedule V — Yes [ ] No [X]

VI. Did you, your spouse, or a dependent child receive any reportable gift(s) in the reporting period (i.e., aggregating more than $250 and not otherwise exempt)?
If yes, complete and attach Schedule VI. — Yes [ ] No [X]

VII. Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $250 from one source)?
If yes, complete and attach Schedule VII. — Yes [ ] No [X]

VIII. Did you hold any reportable positions on or before the date of filing in the current calendar year?
If yes, complete and attach Schedule VIII. — Yes [X] No [ ]

IX. Did you have any reportable agreement or arrangement with an outside entity?
If yes, complete and attach Schedule IX. — Yes [X] No [ ]

Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION — ANSWER EACH OF THESE QUESTIONS

TRUSTS — Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child? — Yes [ ] No [X]

EXEMPTION — Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption? — Yes [ ] No [X]

CERTIFICATION — THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended. The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct or its designee. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil penalties and criminal sanctions (*See* 5 U.S.C. app. 4, §104 and 18 U.S.C. §1001).

SIGNATURE OF REPORTING INDIVIDUAL: James A. Gibbons

DATE (Month, Day, Year): May 11, 1998

1393

SCHEDULE I — EARNED INCOME

List the source, type, and amount of earned income from any source (other than the filer's current employment by the U S Government) totalling $200 or more during the preceding calendar year. For a spouse, list the source and amount of any honoraria, list only the source for other spouse earned income exceeding $1,000.

Source	Type	Amount
Examples Keene State	Approved Teaching Fee	$6,000
State of Maryland	Legislative Pension	$9,000
Civil War Roundtable (Oct 2nd)	Spouse Speech	$1,000
Ontario County Board of Education	Spouse Salary	NA
Dewnig Syndicate, Inc.	Spouse Salary	N/A
Washoe County Airport Authority	Spouse-Bd. of Trustees	N/A

For payments to charity in lieu of honoraria, use Schedule II.

Name James A. Gibbons | Page 3 of 6

SCHEDULE III — ASSETS AND "UNEARNED" INCOME

BLOCK A — Asset and/or Income Source

Identify (a) each asset held for investment or production of income with a fair market value exceeding $1,000 at the end of the reporting year, and (b) any other asset or source of income which generated more than $200 in "unearned" income during the year. For rental property or land, provide an address. Provide full names of any mutual funds. For an IRA or retirement plan that is *self-directed*, list the underlying assets worth more than $1,000. For an IRA or retirement plan that is not selfdirected, name the institution holding the account.

Exclude: Your personal residence(s) (unless there is rental income); any debt owed to you by your spouse, or by your or your spouse's child, parent, or sibling; any deposits totalling $5,000 or less in personal savings accounts; any financial interests in or income derived from U.S. Government retirement programs

If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC) or is jointly held (JT), in the optional column on the far left

BLOCK B — Value of Asset

at close of reporting year
If you use a valuation method other than fair market value, please specify the method used
If an asset was sold and is included only because it generated income, the value should be "None."

BLOCK C — Type of Income

BLOCK D — Amount of Income

For IRA's and retirement plans that are *not* self-directed, you may write in "NA" for income.

BLOCK E — Transaction

Indicate if asset was purchased (P), sold (S), or exchanged (E) in reporting year.

	BLOCK A	A None	B $1 – $1,000	C $1,001 – $15,000	$15,001 – $50,000	E $50,001 – $100,000	F $100,001 – $250,000	G $250,001 – $500,000	H $500,001 – $1,000,000	I $1,000,001 – $5,000,000	J $5,000,001 – $25,000,000	K $25,000,001 – $50,000,000	L Over $50,000,000	BLOCK C: DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Type of Income (Specify. For Example, Partnership Income or Farm Income)	BLOCK D: I None	II $1 – $200	III $201 – $1,000	IV $1,001 – $2,500	V $2,501 – $5,000	VI $5,001 – $15,000	VII $15,001 – $50,000	VIII $50,001 – $100,000	IX $100,001 – $1,000,000	X $1,000,001 – $5,000,000	XI Over $5,000,000	BLOCK E
SP, DC, JT	*Examples*			Indefinite		X	X							X		X				Royalties						X			X			P
SP	Mega Corp Stock																															
	Simon & Schuster																															
	1st Bank of Paducah, KY accounts																															
JT	US Bancorp.				X											X																P
	US Bank IRA(rollover)						X														N/A											P
SP	US Bank IRA					X															N/A											P
	Delta Family Care Savings					X															N/A	Not self directed										P
	3 vacant lots, Washoe County, Nevada						X																									P

For additional assets and unearned income, use next page.

1395

SCHEDULE III — ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Name James A. Gibbons | Page 4 of 6

SP. DC JT	BLOCK A Asset and/or Income Source	BLOCK B Year-End Value of Asset											BLOCK C Type of Income							BLOCK D Amount of Income										BLOCK E Transaction
		A None	B $1 – $1,000	C $1,001 – $15,000	D $15,001 – $50,000	E $50,001 – $100,000	F $100,001 – $250,000	G $250,001 – $500,000	H $500,001 – $1,000,000	I $1,000,001 – $5,000,000	J $5,000,001 – $25,000,000	K $25,000,001 – $50,000,000	L Over $50,000,000	DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Type of Income (Specify)	I None	II $1 – $200	III $201 – $1,000	IV $1,001 – $2,500	V $2,501 – $5,000	VI $5,001 – $15,000	VII $15,001 – $50,000	VIII $50,001 – $100,000	IX $100,001 – $1,000,000	X $1,000,001 – $5,000,000	XI Over $5,000,000	P. S. E
JT	Dean Witter			X											X	X					X									
	U.S. Bank of NV.			X											X	X						X								
DC	U.S. Bank of NV			X											X	X					X									
DC	Dean Witter- Priced Investments				X									X			X							X						
DC	Dean Witter-Custodial holdings				X										X								X							
DC	State Farm-Universal				X																X									
	Life policies. (Policies in irrevocable trust to benefit dependent child.																													
	Delta Pension					X															N/A Not self directed									

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SCHEDULE IV — TRANSACTIONS

Name James A. Gibbons | Page 5 of 6

SP, DC, JT	Asset	Type of Transaction: PURCHASE	SALE	EXCHANGE	Date (MO/DAY/YR)	Amount of Transaction: B ($1,001–$15,000)	C ($15,001–$50,000)	D ($50,001–$100,000)	E ($100,001–$250,000)	F ($250,001–$500,000)	G ($500,001–$1,000,000)	H ($1,000,001–$5,000,000)	I ($5,000,001–$25,000,000)	J ($25,000,001–$50,000,000)	K (Over $50,000,000)
SP	*Example* Mega Corporation Common Stock	X			10-12-97		X								
JT	Purchase of tax deferred annuity of $1,000 per month with Dean Witter	X			Monthly 1997	X									

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1997

SCHEDULE VIII — POSITIONS

Report all positions, compensated or uncompensated, held during the current calendar year as an officer, director, trustee of an organization, partner, proprietor, representative, employee, or consultant of any corporation, firm, partnership, or other business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States

Exclude: Positions held in any religious, social, fraternal, or political entities; positions solely of an honorary nature; and positions listed on Schedule I.

Position	Name of Organization
Board Member	National Conference Advisory Board

SCHEDULE IX — AGREEMENTS

Identify the date, parties to, and general terms of any agreement or arrangement with respect to: future employment; a leave of absence during the period of government service; continuation or deferral of payments by a former or current employer other than the U.S. Government; or continuing participation in an employee welfare or benefit plan maintained by a former employer.

Date	Parties To	Terms of Agreement
1-1-97	Delta Pension Benefits	Monthly withdrawal of$504.00
1-1-97	Travelers Pension (Delta)	Monthly withdrawal of $161.93

GPO 1998 46-260 (mac)

Use additional sheets if more space is required.

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1997

FORM A
For use by Members, officers, and employees

RECEIVED
98 MAY 15 PM 9 20

Wayne T. Gilchrest
(Full Name)

13501 Turners Creek Road, Kennedyville, Md., 21645 410-348-2018
(Mailing Address) (Daytime Telephone)

MAY 13 1998
(Office Use Only)

Filer Status	[X] Member of the U.S. House of Representatives	State Maryland District First	[ ] Officer or Employee	Employing Office	A *$200 penalty* shall be assessed against anyone who files more than 30 days late.
Report Type	[X] Annual (May 15)	[ ] Amendment		[ ] Termination Termination Date	

PRELIMINARY INFORMATION — ANSWER EACH OF THESE QUESTIONS

I. Did you or your spouse have "earned" income (e.g., salaries or fees) of $200 or more from any source in the reporting period? **If yes, complete and attach Schedule I.** — Yes [ ] No [X]

II. Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? **If yes, complete and attach Schedule II.** — Yes [ ] No [X]

III. Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? **If yes, complete and attach Schedule III.** — Yes [X] No [ ]

IV. Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset worth more than $1,000 in the reporting period? **If yes, complete and attach Schedule IV.** — Yes [ ] No [X]

V. Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? **If yes, complete and attach Schedule V.** — Yes [ ] No [X]

VI. Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $250 and not otherwise exempt)? **If yes, complete and attach Schedule VI** — Yes [ ] No [X]

VII. Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $250 from one source)? **If yes, complete and attach Schedule VII.** — Yes [X] No [ ]

VIII. Did you hold any reportable positions on or before the date of filing in the current calendar year? **If yes, complete and attach Schedule VIII** — Yes [ ] No [X]

IX. Did you have any reportable agreement or arrangement with an outside entity? **If yes, complete and attach Schedule IX.** — Yes [ ] No [X]

Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION — ANSWER EACH OF THESE QUESTIONS

TRUSTS—Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child? — Yes [ ] No [X]

EXEMPTION– Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption? — Yes [ ] No [X]

CERTIFICATION — THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended. The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct or its designee. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil penalties and criminal sanctions (*See* 5 U.S.C. app. 4, §104 and 18 U.S.C. §1001).

SIGNATURE OF REPORTING INDIVIDUAL: Wayne T. Gilchrest

DATE (Month/Day/Year): May 6, 1998

1399

Name Wayne T. Gilchrest | Page 2 of 4

SCHEDULE III — ASSETS AND "UNEARNED" INCOME

BLOCK A — Asset and/or Income Source

Identify (a) each asset held for investment or production of income with a fair market value exceeding $1,000 at the end of the reporting year, and (b) any other asset or source of income which generated more than $200 in "unearned" income during the year. For rental property or land, provide an address. Provide full names of any mutual funds. For an IRA or retirement plan that is *self-directed*, list the underlying assets worth more than $1,000. For an IRA or retirement plan that is not selfdirected, name the institution holding the account.

Exclude: Your personal residence(s) (unless there is rental income), any debt owed to you by your spouse, or by your or your spouse's child, parent, or sibling, any deposits totalling $5,000 or less in personal savings accounts, any financial interests in or income derived from U.S. Government retirement programs.

If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC) or is jointly held (JT), in the optional column on the far left.

BLOCK B — Value of Asset

at close of reporting year. If you use a valuation method other than fair market value, please specify the method used. If an asset was sold and is included only because it generated income, the value should be "None."

BLOCK C — Type of Income

BLOCK D — Amount of Income

For IRA's and retirement plans that are *not* self-directed, you may write in "NA" for income.

BLOCK E — Transaction

Indicate if asset was purchased (P), sold (S), or exchanged (E) in reporting year.

	BLOCK A: Asset and/or Income Source	BLOCK B: Value of Asset	BLOCK C: Type of Income	BLOCK D: Amount of Income	BLOCK E: Transaction
		A None / B $1 – $1,000 / C $1,001 – $15,000 / E $15,001 – $50,000 / F $50,001 – $100,000 / G $100,001 – $250,000 / H $250,001 – $500,000 / I $500,001 – $1,000,000 / J $1,000,001 – $5,000,000 / K $5,000,001 – $25,000,000 / L $25,000,001 – $50,000,000 / Over $50,000,000	DIVIDENDS / RENT / INTEREST / CAPITAL GAINS / EXCEPTED TRUST / QUALIFIED BLIND TRUST / Other Type of Income (Specify. For Example: Partnership Income or Farm Income)	I None / II $1 – $200 / III $201 – $1,000 / IV $1,001 – $2,500 / V $2,501 – $5,000 / VI $5,001 – $15,000 / VII $15,001 – $50,000 / VIII $50,001 – $100,000 / IX $100,001 – $1,000,000 / X $1,000,001 – $5,000,000 / XI Over $5,000,000	
SP DC JT	*Examples* SP Mega Corp Stock Simon & Schuster JT 1st Bank of Paducah KY accounts	Indelinite X	X X Royalties	X X	P P
JT	Peoples Bancorp - Savings	X	X	X	
SP	Peoples Bancorp - Savings	X	X	X	

For additional assets and unearned income, use next page.

1400

SCHEDULE III — ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Name: Wayne T. Gilchrest | Page 3 of 4

SP. DC. JT	BLOCK A Asset and/or Income Source	BLOCK B Year-End Value of Asset: A None	B $1 – $1,000	C $1,001 – $15,000	D $15,001 – $50,000	E $50,001 – $100,000	F $100,001 – $250,000	G $250,001 – $500,000	H $500,001 – $1,000,000	I $1,000,001 – $5,000,000	J $5,000,001 – $25,000,000	K $25,000,001 – $50,000,000	L Over $50,000,000	BLOCK C Type of Income: DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Type of Income (Specify)	BLOCK D Amount of Income: I None	II $1 – $200	III $201 – $1,000	IV $1,001 – $2,500	V $2,501 – $5,000	VI $5,001 – $15,000	VII $15,001 – $50,000	VIII $50,001 – $100,000	IX $100,001 – $1,000,000	X $1,000,001 – $5,000,000	XI Over $5,000,000	BLOCK E Transaction: P. S. E.
	INHERITED (12/97) PROPERTIES:																														
	LISTED SECURITIES:																														
JT	A T & T			X										X																	
JT	Bell Atlantic				X									X																	
JT	CBS Corporation		X											X																	
JT	Consumers Financial		X											X																	
JT	Delmarva Power & Light				X									X																	
JT	Dominion Resources			X										X																	
JT	General Motors			X										X																	
JT	GTE			X										X																	
JT	Lucent Technologies			X										X																	
JT	NCR Corporation		X											X																	
JT	Nuveen Mun. Value Fund			X										X			X						X								
JT	Potomac Electric			X										X									X								
JT	Raytheon Company		X											X																	
JT	SBC Communications			X										X																	
JT	Wash Gas Light Co			X										X																	
	REAL PROPERTY:																														
SP	One-fourth interest in rental property				X										X																

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Name	Wayne T. Gilchrest	Page 4 of 4

SCHEDULE VII —TRAVEL PAYMENTS AND REIMBURSEMENTS

Identify the source and list travel itinerary, dates, and nature of expenses provided for travel and travel-related expenses totalling more than $250 received by you, your spouse, or a dependent child during the reporting period. Indicate whether a family member accompanied the traveler at the sponsor's expense, and the amount of time, if any, that was not at the sponsor's expense. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor.

Exclude: Travel-related expenses provided by federal, state, and local governments, or by a foreign government required to be separately reported under the Foreign Gifts and Decorations Act (5 U.S.C. § 7342), travel paid for by a Federal political committee; travel provided to a spouse or dependent child that is totally independent of his or her relationship to you.

	Source	Date(s)	Point of Departure—Destination—Point of Return	Lodging? (Y/N)	Food? (Y/N)	Was a Family Member Included? (Y/N)	Any time not at sponsor's expense
Examples	Chicago Chamber of Commerce	Mar. 2	Wash., D.C.—Chicago—Wash., D.C.	N	N	N	N
	Roycroft Corporation	Aug. 6–13	Wash., D.C.—Los Angeles—Cleveland	Y	Y	Y	4 Days
	Klamath Alliance for resources and environment	May 2-4	Wash., D.C.-Medford, OR McCloud, CA.-Wash., D.C.	Y	Y	Y	N

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UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1997

FORM A
For use by Members, officers, and employees

93 MAY 15 PM 2:50

Paul E. Gillmor
(Full Name)

7750 North County Road 51; P.O. Box 123
(Mailing Address)

202-225-6405
Daytime Telephone

Old Fort, Ohio 44861

HAND DELIVERED
MC
(Office Use Only)

9

Filer Status	[X]	Member of the U S House of Representatives	State Ohio District 5th	[ ] Officer or Employee	Employing Office
Report Type	[X]	Annual (May 15)	[ ] Amendment	[ ] Termination	Termination Date

A *$200 penalty* shall be assessed against anyone who files more than 30 days late.

PRELIMINARY INFORMATION — ANSWER EACH OF THESE QUESTIONS

I Did you or your spouse have "earned" income (e g , salaries or fees) of $200 or more from any source in the reporting period?
If yes, complete and attach Schedule I. Yes [X] No [ ]

II Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period?
If yes, complete and attach Schedule II. Yes [ ] No [X]

III Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period?
If yes, complete and attach Schedule III. Yes [X] No [ ]

IV Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset worth more than $1,000 in the reporting period?
If yes, complete and attach Schedule IV. Yes [X] No [ ]

V Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period?
If yes, complete and attach Schedule V. Yes [ ] No [X]

VI Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i e , aggregating more than $250 and not otherwise exempt)?
If yes, complete and attach Schedule VI. Yes [ ] No [X]

VII Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $250 from one source)?
If yes, complete and attach Schedule VII. Yes [X] No [ ]

VIII Did you hold any reportable positions on or before the date of filing in the current calendar year?
If yes, complete and attach Schedule VIII. Yes [X] No [ ]

IX Did you have any reportable agreement or arrangement with an outside entity?
If yes, complete and attach Schedule IX. Yes [ ] No [X]

Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION — ANSWER EACH OF THESE QUESTIONS

TRUSTS—Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child? Yes [ ] No [X]

EXEMPTION—Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption? Yes [ ] No [X]

CERTIFICATION — THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct or its designee Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil penalties and criminal sanctions (*See* 5 U S C app 4, §104 and 18 U S C §1001)

SIGNATURE OF REPORTING INDIVIDUAL Paul E. Gillmor

DATE (Month/Day/Year) May 14, 1998

1403

SCHEDULE I — EARNED INCOME

List the source, type, and amount of earned income from any source (other than the filer's current employment by the U.S. Government) totalling $200 or more during the preceding calendar year. For a spouse, list the source and amount of any honoraria; list only the source for other spouse earned income exceeding $1,000.

	Source	Type	Amount
Examples	Keene State	Approved Teaching Fee	$6,000
	State of Maryland	Legislative Pension	$9,000
	Civil War Roundtable (Oct 2nd)	Spouse Speech	$1,000
	Ontario County Board of Education	Spouse Salary	NA
	State of Ohio	Spouse salary	NA
	Public Employees Retirement System of Ohio	Pension	$ 38,600.00

For payments to charity in lieu of honoraria, use Schedule II.

1404

Name Paul E. Gillmor, M.C. | Page 3 of 9

SCHEDULE III — ASSETS AND "UNEARNED" INCOME

BLOCK A — Asset and/or Income Source

Identify (a) each asset held for investment or production of income with a fair market value exceeding $1,000 at the end of the reporting year, and (b) any other asset or source of income which generated more than $200 in "unearned" income during the year. For rental property or land, provide an address. Provide full names of any mutual funds. For an IRA or retirement plan that is *self-directed*, list the underlying assets worth more than $1,000. For an IRA or retirement plan that is not selfdirected, name the institution holding the account.

Exclude: Your personal residence(s) (unless there is rental income), any debt owed to you by your spouse, or by your or your spouse's child, parent, or sibling, any deposits totalling $5,000 or less in personal savings accounts, any financial interests in or income derived from U.S. Government retirement programs.

If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC) or is jointly held (JT), in the optional column on the far left.

BLOCK B — Value of Asset at close of reporting year. If you use a valuation method other than fair market value, please specify the method used. If an asset was sold and is included only because it generated income, the value should be "None."

BLOCK C — Type of Income

BLOCK D — Amount of Income For IRA's and retirement plans that are *not* self-directed, you may write in "NA" for income.

BLOCK E — Transaction Indicate if asset was purchased (P), sold (S), or exchanged (E) in reporting year.

	BLOCK A	BLOCK B												BLOCK C								BLOCK D											BLOCK E
		A None	B $1 – $1,000	C $1,001 – $15,000	D $15,001 – $50,000	E $50,001 – $100,000	F $100,001 – $250,000	G $250,001 – $500,000	H $500,001 – $1,000,000	I $1,000,001 – $5,000,000	J $5,000,001 – $25,000,000	K $25,000,001 – $50,000,000	L Over $50,000,000	DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Type of Income (Specify. For Example: Partnership Income or Farm Income)	I None	II $1 – $200	III $201 – $1,000	IV $1,001 – $2,500	V $2,501 – $5,000	VI $5,001 – $15,000	VII $15,001 – $50,000	VIII $50,001 – $100,000	IX $100,001 – $1,000,000	X $1,000,001 – $5,000,000	XI Over $5,000,000	P, S, E
SP DC JT	*Examples*		Indefinite			X								X							Royalties				X			X					P
		SP Mega Corp. Stock Simon & Schuster 1st Bank of Paducah, KY accounts																															
	Cooker Restaurants					X								X										X									
	Matlack, Inc				X																	X											
	Progressive Corp	X												X									X										S
	Rollins Truck Leasing							X						X											X								S
	Max & Erma's Restaurants				X																	X											
	Laidlaw Environmental					X																X											S

For additional assets and unearned income, use next page.

SCHEDULE III — ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Name Paul F. Gillmor, M.C. | Page 4 of 9

SP. DC. JT	BLOCK A Asset and/or Income Source	BLOCK B Year-End Value of Asset											BLOCK C Type of Income							BLOCK D Amount of Income										BLOCK E Transaction
		A None	B $1 – $1,000	C $1,001 – $15,000	D $15,001 – $50,000	E $50,001 – $100,000	F $100,001 – $250,000	G $250,001 – $500,000	H $500,001 – $1,000,000	I $1,000,001 – $5,000,000	J $5,000,001 – $25,000,000	K $25,000,001 – $50,000,000	L Over $50,000,000	DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Type of Income (Specify)	I None	II $1 – $200	III $201 – $1,000	IV $1,001 – $2,500	V $2,501 – $5,000	VI $5,001 – $15,000	VII $15,001 – $50,000	VIII $50,001 – $100,000	IX $100,001 – $1,000,000	X $1,000,001 – $5,000,000	XI Over $5,000,000	P. S. E
	Industrial Bancorp				X								X										X							
	Price New Horizons				X								X											X						P
	Dealers Alliance																														
	- debenture	X														X										X					
	- stock						X							X										X							P
	Gillmor Financial Service									X				X												X					
	Paul M. Gillmor Company							X						X										X							
	Thermocolor stock				X																X										I
	Bayshore Leasing				X																X										L
	Gillmor Family Partnership				X											X							X								
	Solar cells				X																X										
	Old Fort Bank savings			X												X							X								
	Old Fort Bank IRA				X											X								X							
	Chas Schaub & Co					X										X								X							
	David Phillips				X											X								X							
	Thermocolor note			X																											

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SCHEDULE III — ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Name Paul E. Gillmor, M.C. | Page 5 of 9

SP, DC, JT	BLOCK A Asset and/or Income Source	BLOCK B Year-End Value of Asset												BLOCK C Type of Income							BLOCK D Amount of Income											BLOCK E Transaction
		A None	B $1 – $1,000	C $1,001 – $15,000	D $15,001 – $50,000	E $50,001 – $100,000	F $100,001 – $250,000	G $250,001 – $500,000	H $500,001 – $1,000,000	I $1,000,001 – $5,000,000	J $5,000,001 – $25,000,000	K $25,000,001 – $50,000,000	L Over $50,000,000	DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Type of Income (Specify)	I None	II $1 – $200	III $201 – $1,000	IV $1,001 – $2,500	V $2,501 – $5,000	VI $5,001 – $15,000	VII $15,001 – $50,000	VIII $50,001 – $100,000	IX $100,001 – $1,000,000	X $1,000,001 – $5,000,000	XI Over $5,000,000	P, S, E
SP	Old Fort Bank IRA				X											X								X							
SP	Dealers Alliance debenture	X														X							X								
SP	American General				X									X									X								
SP	Northwest Natural Gas			X										X									X								
SP	Southwest Natural Gas			X										X								X									
SP	T. Rowe Price funds				X											X							X								
SP	Ohio Public Employees Comp Program				X											X								X							
SP	Star Bank savings			X												X							X								

This page may be copied if more space is required.

SCHEDULE IV — TRANSACTIONS

Report any purchase, sale, or exchange by you, your spouse, or dependent child during the reporting year of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction exceeded $1,000 Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child, or the purchase or sale of your personal residence, unless it is rented out

SP, DC, JT	Asset	Type of Transaction: PURCHASE	SALE	EXCHANGE	Date (MO/DAY/YR)	Amount of Transaction: B ($1,001–$15,000)	C ($15,001–$50,000)	D ($50,001–$100,000)	E ($100,001–$250,000)	F ($250,001–$500,000)	G ($500,001–$1,000,000)	H ($1,000,001–$5,000,000)	I ($5,000,001–$25,000,000)	J ($25,000,001–$50,000,000)	K (Over $50,000,000)
SP	*Example* Mega Corporation Common Stock	X			10-12-97		X								
	Laidlaw Environmental		X		1/07/97	X									
	Laidlaw Environmental		X		1/08/97	X									
	Rollins Truck Leasing		X		6/19/97	X									
	Progressive Corp		X		7/28/97		X								
	Progressive Corp		X		10/08/97		X								
	Part interest: 146 Wilbur Columbus, OH		X		3/07/97	X									
	Part interest: 224 West Third, Columbus, OH		X		3/07/98		X								
	Dealers Alliance	X			6/15/97	X									
	Price New Horizons	X			12/29/97	X									

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SCHEDULE V — LIABILITIES

Report liabilities of over $10,000 owed to any one creditor ***at any time*** during the reporting period by you, your spouse, or dependent child. Mark the highest amount owed during the year. **Exclude:** Any mortgage on your personal residence (unless it is rented out), loans secured by automobiles, household furniture, or appliances, and liabilities owed to a spouse, or the child, parent, or sibling of you or your spouse. Report ***revolving charge accounts*** only if the balance at the end of the reporting period exceeded $10,000.

SP, DC, JT	Creditor	Type of Liability	Amount of Liability									
			B $10,001–$15,000	C $15,001–$50,000	D $50,001–$100,000	E $100,001–$250,000	F $250,001–$500,000	G $500,001–$1,000,000	H $1,000,001–$5,000,000	I $5,000,001–$25,000,000	J $25,000,001–$50,000,000	K Over $50,000,000
	Example First Bank of Wilmington, Delaware	Mortgage on 123 Main St., Dover, Del.				X						
	Perpetual Federal Mortgage, Urbana, OH	mortgage on 225 W Third St										
	----------	Columbus, OH	X									
	Perpetual Federal Mortgage, Urbana, OH	mortgage on 148 Wilbur										
	----------	Columbus, OH	X									

SCHEDULE VI — GIFTS

Report the source, a brief description, and the value of all gifts totalling more than $250 received by you, your spouse, or a dependent child from any source during the year.

Exclude: Gifts from relatives, gifts of personal hospitality of an individual, local meals, and gifts to a spouse or dependent child that are totally independent of his or her relationship to you. Gifts with a value of $100 or less need not be added towards the $250 disclosure threshold.

Note: The gift rule (House Rule 51) prohibits gifts except as specifically provided in the rule.

Source	Description	Value
Example Mr. Joseph H. Smith, Anytown, Anystate	Silver Platter (determination on personal friendship received from Committee on Standards)	$270

Use additional sheets if more space is required.

SCHEDULE VII —TRAVEL PAYMENTS AND REIMBURSEMENTS

Identify the source and list travel itinerary, dates, and nature of expenses provided for travel and travel-related expenses totalling more than $250 received by you, your spouse, or a dependent child during the reporting period. Indicate whether a family member accompanied the traveler at the sponsor's expense, and the amount of time, if any, that was not at the sponsor's expense. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor.

Exclude: Travel-related expenses provided by federal, state, and local governments, or by a foreign government required to be separately reported under the Foreign Gifts and Decorations Act (5 U.S.C. § 7342); travel paid for by a Federal political committee; travel provided to a spouse or dependent child that is totally independent of his or her relationship to you

Source	Date(s)	Point of Departure—Destination—Point of Return	Lodging? (Y/N)	Food? (Y/N)	Was a Family Member Included? (Y/N)	Any time not at sponsor's expense
Examples: Chicago Chamber of Commerce	Mar 2	Wash., D.C.—Chicago—Wash., D.C.	N	N	N	N
Roycroft Corporation	Aug 6–13	Wash., D.C.—Los Angeles—Cleveland	Y	Y	Y	4 Days
American President Lines	Aug 19-21	Hong Kong	Y	Y	Y	10 days

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SCHEDULE VIII — POSITIONS

Report all positions, compensated or uncompensated, held during the current calendar year as an officer, director, trustee of an organization, partner, proprietor, representative, employee, or consultant of any corporation, firm, partnership, or other business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States.

Exclude: Positions held in any religious, social, fraternal, or political entities; positions solely of an honorary nature; and positions listed on Schedule I

Position	Name of Organization
Director	Gillmor Financial Services
Director	Old Fort Banking Company
Director	Thermocolor Corporation
Director	Dealers Alliance Corporation
Trustee	Paul M. and Lucy J. Gillmor Foundation
Director	DeNovo Corporation

SCHEDULE IX — AGREEMENTS

Identify the date, parties to, and general terms of any agreement or arrangement with respect to: future employment; a leave of absence during the period of government service; continuation or deferral of payments by a former or current employer other than the U.S. Government; or continuing participation in an employee welfare or benefit plan maintained by a former employer.

Date	Parties To	Terms of Agreement

GPO 1998 46-260 (mac)

Use additional sheets if more space is required.

SCHEDULE III — ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Name Paul E. Gillmor, M.C. | Page 3 of 4

SP DC JT	BLOCK A Asset and/or Income Source	BLOCK B Year-End Value of Asset											BLOCK C Type of Income						BLOCK D Amount of Income										BLOCK E Transaction
		A None	B $1 - $1,000	C $1,001 - $15,000	D $15,001 - $50,000	E $50,001 - $100,000	F $100,001 - $250,000	G $250,001 - $500,000	H $500,001 - $1,000,000	I $1,000,001 - $5,000,000	J $5,000,001 - $25,000,000	K $25,000,001 - $50,000,000	L Over $50,000,000	DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Type of Income (Specify)	I None	II $1 - $200	III $201 - $1,000	IV $1,001 - $2,500	V $2,501 - $5,000	VI $5,001 - $15,000	VII $15,001 - $50,000	VIII $50,001 - $100,000	IX $100,001 - $1,000,000	X $1,000,001 - $5,000,000	XI Over $5,000,000	P S E
	Industrial Bancorp				X									X									X							
	Price New Horizons				X									X										X						P
	Dealers Alliance																													
	- debenture	X														X									X					
	- stock						X							X										X						P
	Gillmor Financial Service									X				X											X					
	Paul M. Gillmor Company							X						X										X						
	Thermocolor stock				X																X									
	Bayshore Leasing				X																X									
	Gillmor Family Partnership				X											X							X							
	Solar cells				X																X									
	Old Fort Bank savings			X												X							X							
	Old Fort Bank IRA				X											X								X						
	Chas Schaub & Co					X										X								X						
	David Phillips note				X											X								X						
	Thermocolor note			X																										

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SCHEDULE VII —FACT-FINDING, SUBSTANTIAL PARTICIPATION, AND OTHER TRAVEL

Identify the source and list travel itinerary, dates, and nature of expenses provided for travel and travel-related expenses totalling more than $250 received by you, your spouse, or a dependent child during the reporting period. Indicate whether a family member accompanied the traveler at the sponsor's expense, and the amount of time, if any, that was not at the sponsor's expense. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor.

Exclude: Travel-related expenses provided by federal, state, and local governments, or by a foreign government required to be separately reported under the Foreign Gifts and Decorations Act (5 U S C. § 7342); travel paid for by campaign funds; travel provided to a spouse or dependent child that is totally independent of his or her relationship to you. For further information, see Instructions, pages 24–25.

Source	Date(s)	Point of Departure—Destination—Point of Return	Lodging? (Y/N)	Food? (Y/N)	Was a Family Member Included? (Y/N)	Any time not at sponsor's expense
Examples Chicago Chamber of Commerce	Mar. 2	Wash . D C —Chicago—Wash., D.C	N	N	N	N
Roycroft Corporation	Aug 6–13	Wash., D.C —Los Angeles—Cleveland	Y	Y	Y	4 Days
(USIA approved exchange) Asia Pacific Exchange Foundation	Aug 11-23	Ohio - PRC - Hong Kong - Singapore - Ohio	Y	Y	Y	2 days
American President Lines	Aug 19-20	Hong Kong	Y	Y	Y	10 days

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